

Commonwealth of Kentucky
Personnel Cabinet

Health Insurance Program Monthly Report



Prepared for:

Kentucky Group Health Insurance
Board Members

April 2010

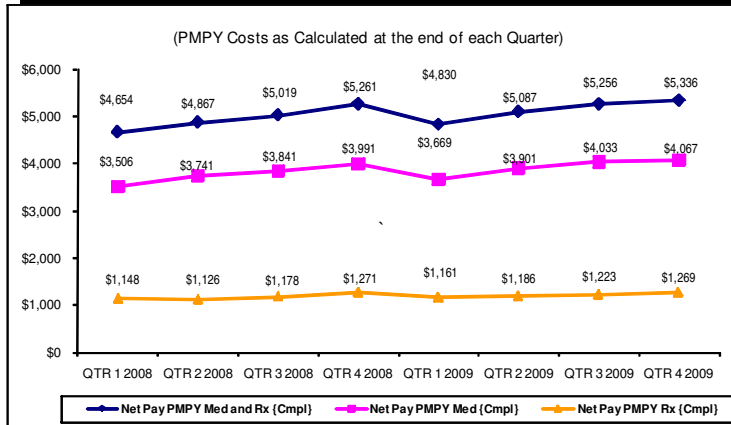
DASHBOARD REPORT: BASED ON INCURRED CLAIMS

Includes Projections for Incurred, but Not Yet Reported (IBNR or CMPL)

Enrollment

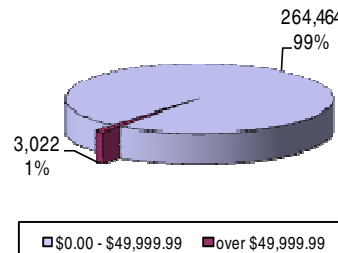
| Fact | Dec 2008 - Nov 2009 | Dec 2007 - Nov 2008 | % Change |
|-------------------|---------------------|---------------------|----------|
| Employees Avg Med | 156,533 | 154,270 | 1.50% |
| Members Avg Med | 258,542 | 251,727 | 2.70% |
| Family Size Avg | 1.7 | 1.6 | 1.20% |
| Member Age Avg | 37.9 | 38.0 | -0.10% |

Net Incurred Claims Cost per Member

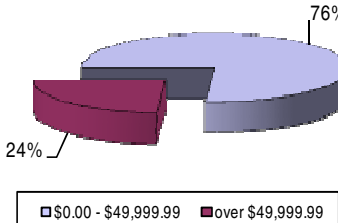


High Cost Claimants December 08 – November 09

% of High Cost Patients



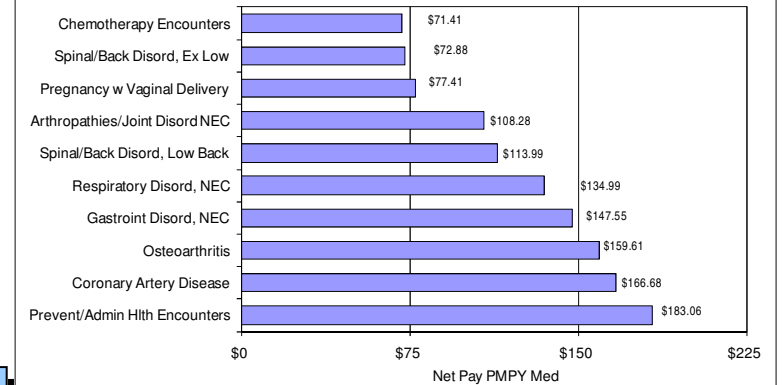
% of Total Net Payments (Med and Rx)



Prescription Drug Programs

| | Fact | Dec 2007 - Nov 2008 | Dec 2008 - Nov 2009 | % Change |
|------------|-------------------------------|---------------------|---------------------|----------|
| Mail Order | Discount Off AWP % Rx | 38.82% | 39.32% | 1.27% |
| | Scripts Generic Efficiency Rx | 88.62% | 90.78% | 2.44% |
| Retail | Discount Off AWP % Rx | 38.27% | 38.31% | 0.11% |
| | Scripts Generic Efficiency Rx | 91.70% | 93.70% | 2.19% |
| Total | Discount Off AWP % Rx | 38.35% | 38.48% | 0.34% |
| | Scripts Generic Efficiency Rx | 91.54% | 93.54% | 2.19% |
| | Scripts Maint Rx % Mail Order | 7.47% | 8.21% | 9.96% |

Prescription Drug Programs



Allowed Claims Costs PMPY with Norms

| | Dec 2007 - Nov 2008 | Dec 2008 - Nov 2009 | Trend | Recent US Norm | Comp to Norm |
|----------------------------------|---------------------|---------------------|-------|----------------|--------------|
| Allow Amt PMPY Med {Cmpl} | \$4,141.26 | \$4,404.45 | 6% | \$3,489.72 | 20.77% |
| Allow Amt PMPY IP Acute {Cmpl} | \$1,155.00 | \$1,221.13 | 6% | N/A | N/A |
| Allow Amt PMPY OP Med {Cmpl} | \$2,976.03 | \$3,165.59 | 6% | \$2,351.51 | 25.72% |
| Allow Amt PMPY OP Fac Med {Cmpl} | \$1,436.32 | \$1,584.98 | 10% | N/A | N/A |
| Allow Amt PMPY Office Med {Cmpl} | \$1,011.07 | \$1,019.06 | 1% | \$0.00 | N/A |
| Allow Amt PMPY OP Lab {Cmpl} | \$255.93 | \$281.91 | 10% | \$0.00 | N/A |
| Allow Amt PMPY OP Rad {Cmpl} | \$517.98 | \$543.90 | 5% | \$0.00 | N/A |
| Out of Pocket PMPY Med {Cmpl} | \$345.69 | \$407.94 | 18% | \$476.62 | -16.84% |
| Allow Amt PMPY Rx {Cmpl} | \$1,360.50 | \$1,449.74 | 7% | \$931.36 | 35.76% |
| Out of Pocket PMPY Rx {Cmpl} | \$198.19 | \$233.08 | 18% | \$0.00 | N/A |

Cost Drivers Support

| Fact | Dec 2007 - Nov 2008 | Dec 2008 - Nov 2009 | % Change |
|--------------------------------|---------------------|---------------------|----------|
| Allow Amt Per Day Adm Acute | \$3,238.06 | \$3,447.42 | 6.47% |
| Days Per 1000 Adm Acute | 350.20 | 343.79 | -1.83% |
| Allow Amt Per Visit OP Fac Med | \$782.51 | \$846.98 | 8.24% |
| Visits Per 1000 OP Fac Med | 1,835.52 | 1,860.41 | 1.36% |
| Allow Amt Per Visit Office Med | \$115.72 | \$113.42 | -1.99% |
| Visits Per 1000 Office Med | 8,736.38 | 8,902.59 | 1.90% |
| Allow Amt Per Day Supply Rx | \$2.33 | \$2.46 | 5.56% |
| Days Supply PMPY Rx | 583.59 | 588.91 | 0.91% |

Cost Drivers—Utilization and Price Trends

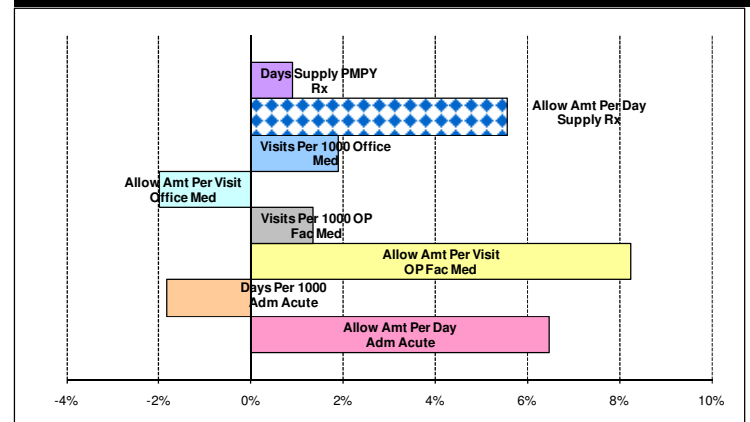


Table of Contents

| | |
|---|-------|
| Introduction.. | 4 |
| Overview..... | 4 |
| Definitions..... | 5 |
| Enrollment | 6-8 |
| Claims Costs | 9-15 |
| Medical Claims Utilization | 16 |
| Analysis of Deductibles..... | 17-20 |
| Analysis of Individuals and Families Meeting their Out of Pocket Expenses | 21-24 |
| Premium (or Premium Equivalent)..... | 25 |
| Rx Utilization..... | 26-30 |
| Utilization | 31-32 |
| Claims Lag Analysis | 33-34 |
| Claims Distribution based on Age/Gender..... | 35 |
| Allowed Amount Distribution..... | 36 |
| Summary of Enrollment and Claims | 37 |

Introduction

The Department of Employee Insurance (DEI) is pleased to provide an analysis of the Kentucky Employees Health Plan. In response to requests for data analysis, this report has been prepared to provide information related to enrollment, claims payment, and utilization.

It is the Department's intent to update this information on a monthly basis in an effort to provide current information about Kentucky's Health Insurance Program.

Overview

This report is compiled using Medstat, which is DEI's health insurance information management system. Medstat warehouses enrollment and claims data. Enrollment data is provided by DEI while claims data is provided by each carrier and/or TPA.

Claims information may be analyzed by either "incurred" or "paid" dates. "Incurred" reports specify paid amounts for claims that were incurred in a specified timeframe. Due to the lag time in submittal and payment of claims, historical reports that are based on incurred claims may change significantly with each new database update since additional incurred claims will be added. "Paid" claims reports specify the paid amount for claims regardless of when the claims may have been incurred. Unless otherwise specified, data contained in this report are based on "incurred" claims.

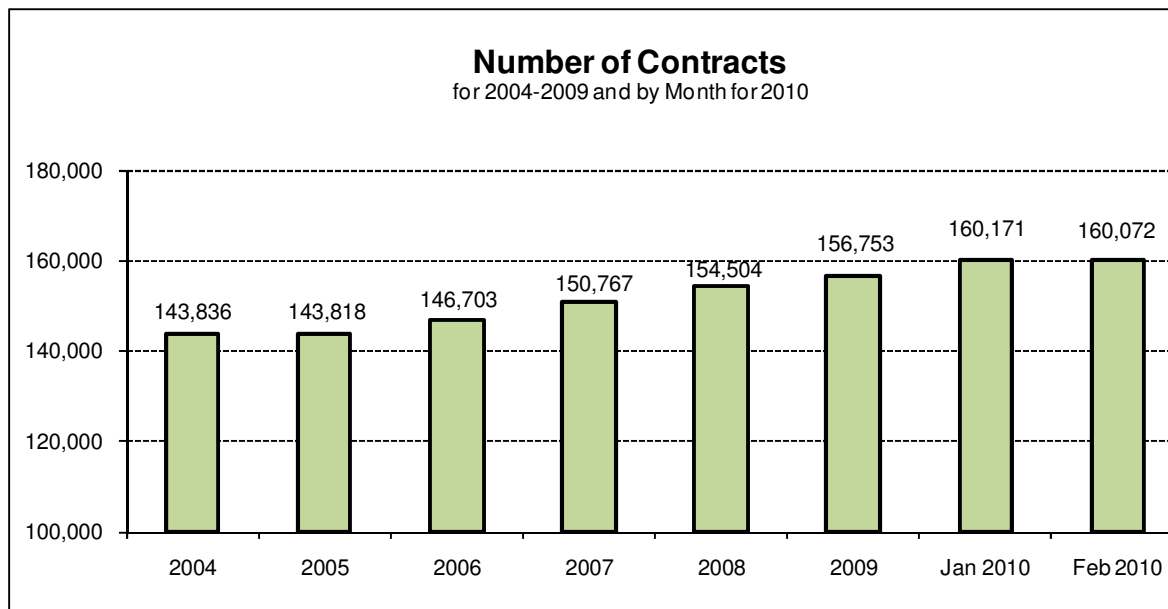
Enrollment in the KEHP changes on a daily basis due to a variety of reasons such as: new hires, adding dependents, dropping dependents, marriage, divorce, becoming Medicare eligible, etc. Therefore, Medstat is dealing with a fluid enrollment base. Also, each carrier processes claims slightly differently. During 2006 Medstat processed enrollment information for a total of 258,809 members as well as 7,973,124 claims (3,96,007 Medical claims and 4,584,166 prescriptions) from different carriers. When dealing with such large numbers it is impossible to tag every claim to a corresponding group, carrier, service type, etc. While the tagging rate for the KEHP data exceeds 99%, you may still see information on reports stated as "~Missing". This indicates any enrollment or claims that could not be "tagged" by Medstat.

Definitions

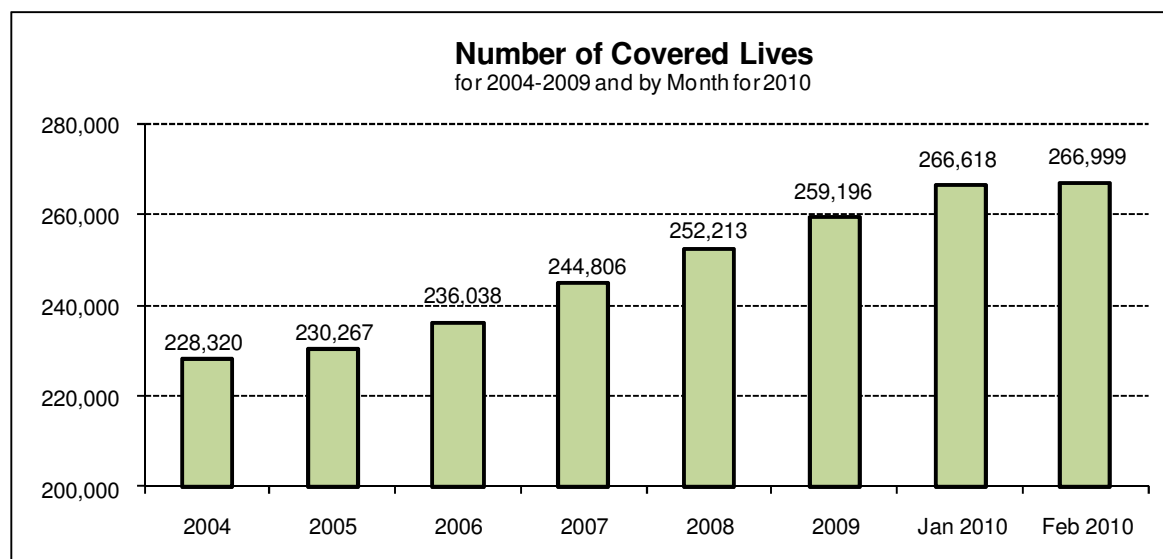
- **Employee** represents an individual eligible to participate in KEHP as a retiree in either KTRS or KRS, or by being employed by one of the agencies that participate with KEHP (example: state employee, school boards, Quasi agency, etc.). Employee may also be referred to as “planholder” or “contracts”. Please note that Medstat deals with Cross-reference plans uniquely. Although there are in fact two “employees” Medstat can only designate the planholder as an employee. Therefore, the cross-referenced spouse is considered a dependent and all claims and utilization data related to them is counted as a “member”.
- **Member** includes all employees plus any dependents that are covered through the KEHP. Members may also be referred to as “covered lives”.
- **Group** is Kentucky Retirement System (KRS), Kentucky Teachers Retirement System (KTRS), State Employees, School Boards, or Other (includes: COBRA, Health Departments, KCTCS, Quasi/Local Governments).
- **Plan** is Standard PPO, Capitol Choice, Optimum PPO, Maximum Choice, Commonwealth Essential, Commonwealth Enhanced, Commonwealth Premier, or Commonwealth Select.
- **Carrier** may be Aetna, Anthem, Bluegrass Family Health, CHA Health, United Healthcare, or Humana (please note that Express Scripts data is designated as Humana).
- **Generic Efficiency** means the number of prescriptions that are filled with a generic product as a percentage of the total number of prescriptions where a generic is available.
- **OOP** is the amount paid out-of-pocket by the member for facility, professional, and prescription drug services. This generally includes coinsurance, co-payment, and deductible amounts.
- **Allowed Amount** is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.
- **Net Payment** is the net amount paid for all claims. It represents the amount after all pricing guidelines have been applied, and all third party, co-payment, coinsurance, and deductible amounts have been subtracted.
- **Patients** is the unique count of members who received facility, professional, or pharmacy services.
- **Days Supply** is the number of days for which drugs were supplied for prescriptions filled. It represents the number of days of drug therapy covered by a prescription.
- **Mail Order** is computed as any script filled with a “days supply” of more than 30 days, regardless of the physical location where the prescription was filled.
- **Retail** is computed as any script filled with a “days supply” of 30 days or less, regardless of the physical location where the prescription was filled.

Enrollment

The following chart shows planholder enrollment (contracts) for 2004-2009 and monthly year-to-date for 2010. Enrollment will fluctuate on a monthly basis (Approximately 8,000 cross-referenced spouses in any given month are not included)

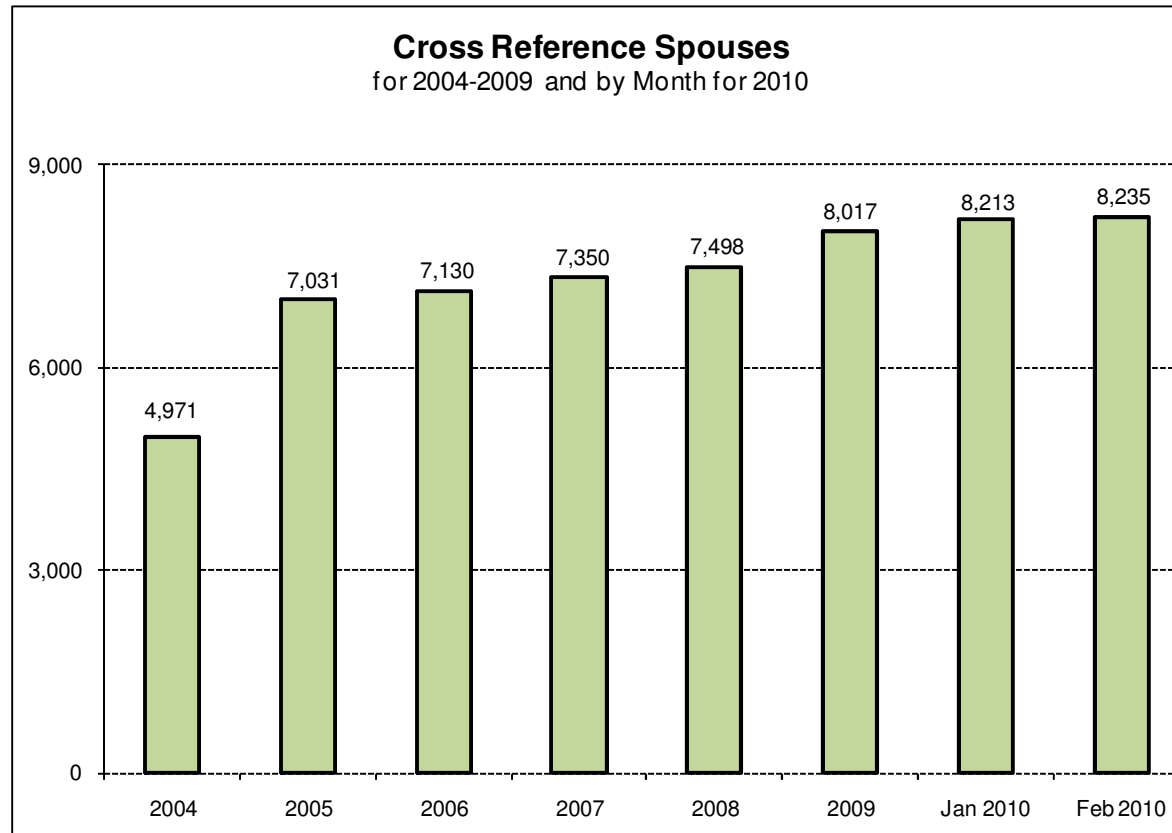


The following chart shows member enrollment (covered lives) for 2004-2009 and monthly year-to-date for 2010. Enrollment will fluctuate on a monthly basis.



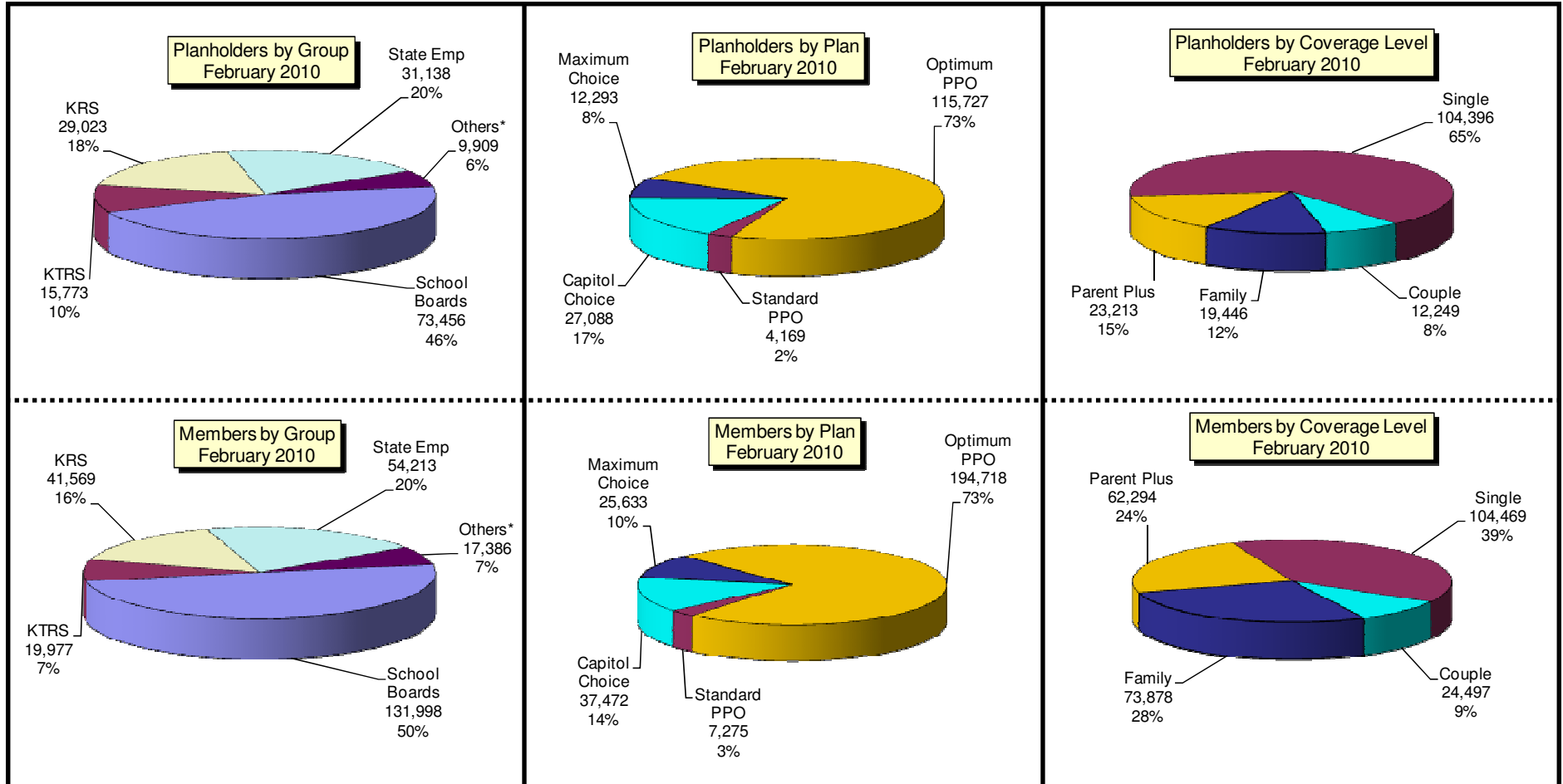
Enrollment *(continued)*

The following graph shows the number of cross-reference spouses for 2004-2009 and monthly year-to-date for 2010. The number of Cross Referenced Spouses will fluctuate on a monthly basis.



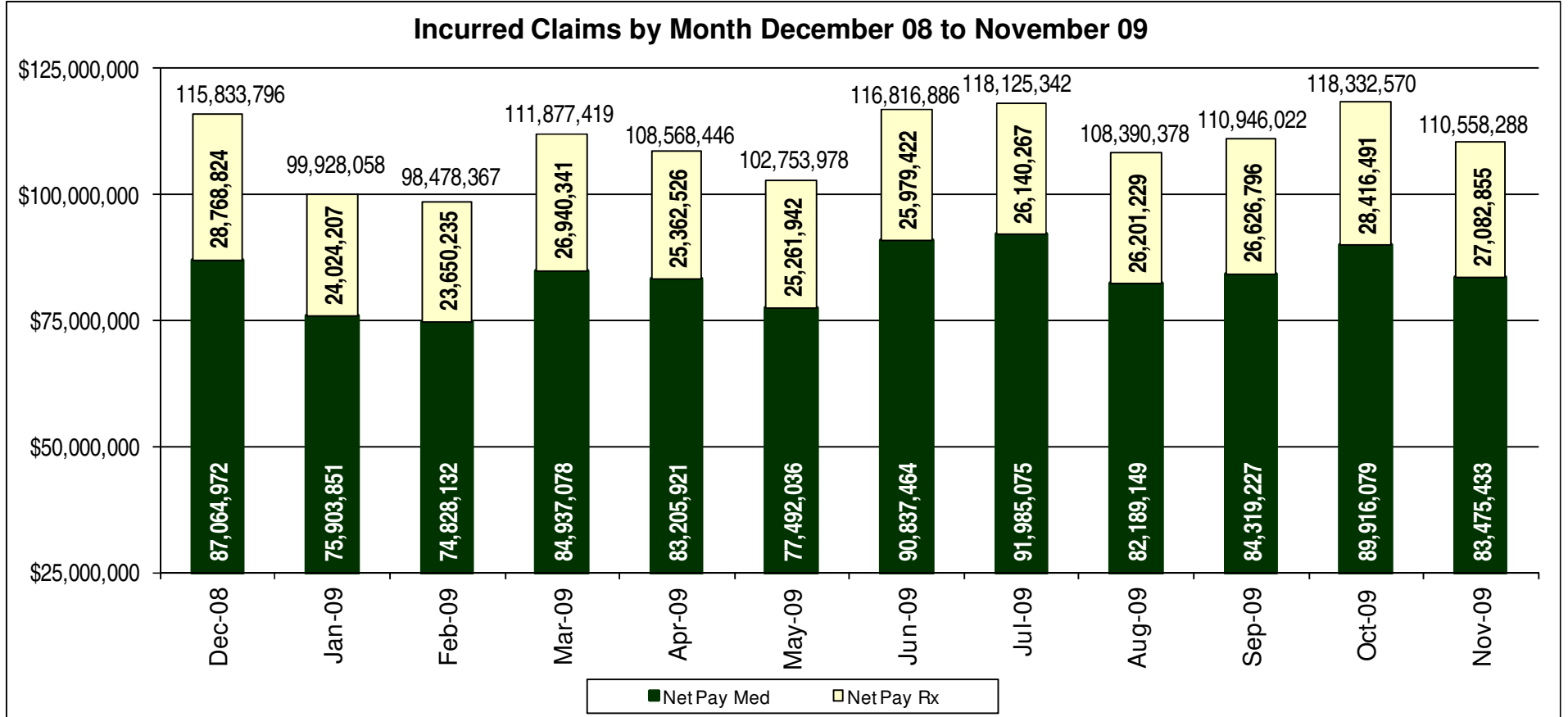
Enrollment *(continued)*

The following charts show Planholder and Member enrollment by group, plan, and coverage level.



Claims Costs

Claims costs include Medical and Prescription (Rx) for the most recent rolling year. Based on Incurred Claims.



Claims Costs *(continued)*

The following tables represent incurred claims by Group for 2004 - 2008 and monthly year-to-date for 2009.

INCURRED MEDICAL CLAIMS (no Rx) by Group:

| Time Period | School Boards | KTRS | KRS | State Employees | Others* | Totals |
|--------------------|----------------------|---------------|---------------|------------------------|----------------|---------------|
| 2004 | 246,147,555 | 70,821,610 | 105,467,391 | 123,091,625 | 44,876,807 | \$590,404,988 |
| 2005 | 258,583,635 | 80,446,325 | 122,103,230 | 127,041,805 | 47,167,061 | \$635,342,056 |
| 2006 | \$307,404,829 | \$93,874,833 | \$147,000,881 | \$151,118,572 | \$48,943,683 | \$748,342,797 |
| 2007 | \$335,233,747 | \$96,138,953 | \$156,119,263 | \$147,816,830 | \$50,969,860 | \$786,278,653 |
| 2008 | \$403,585,169 | \$109,530,517 | \$194,844,864 | \$178,919,575 | \$63,994,497 | \$950,874,621 |
| Jan-09 | \$31,713,530 | \$9,797,586 | \$15,979,742 | \$13,426,869 | \$4,986,123 | \$75,903,851 |
| Feb-09 | \$29,555,130 | \$8,790,364 | \$17,542,930 | \$13,680,192 | \$5,259,517 | \$74,828,132 |
| Mar-09 | \$34,374,119 | \$10,655,649 | \$18,719,921 | \$15,330,262 | \$5,857,127 | \$84,937,078 |
| Apr-09 | \$34,558,577 | \$10,114,344 | \$18,872,606 | \$14,047,938 | \$5,612,456 | \$83,205,921 |
| May-09 | \$31,480,428 | \$8,961,254 | \$17,069,009 | \$14,404,902 | \$5,576,443 | \$77,492,036 |
| Jun-09 | \$41,482,495 | \$10,327,445 | \$18,460,177 | \$14,865,544 | \$5,701,803 | \$90,837,464 |
| Jul-09 | \$40,623,066 | \$10,640,603 | \$19,386,651 | \$15,258,832 | \$6,075,923 | \$91,985,075 |
| Aug-09 | \$32,944,230 | \$10,640,493 | \$18,430,049 | \$14,822,214 | \$5,352,163 | \$82,189,149 |
| Sep-09 | \$34,502,162 | \$10,748,671 | \$18,813,877 | \$14,353,333 | \$5,901,184 | \$84,319,227 |
| Oct-09 | \$37,447,707 | \$10,838,721 | \$20,179,843 | \$15,170,481 | \$6,279,327 | \$89,916,079 |
| Nov-09 | \$34,994,222 | \$10,741,056 | \$18,013,973 | \$14,248,582 | \$5,477,600 | \$83,475,433 |

* Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

Claims Costs *(continued)*

The following tables represent incurred claims by Group for 2004 - 2008 and monthly year-to-date for 2009.

INCURRED Rx CLAIMS (no Med) by Group:

| Time Period | School Boards | KTRS | KRS | State Employees | Others* | Totals |
|--------------------|----------------------|--------------|--------------|------------------------|----------------|---------------|
| 2004 | \$65,369,460 | \$24,608,695 | \$34,687,723 | \$32,464,692 | \$11,366,382 | \$168,496,952 |
| 2005 | \$69,923,171 | \$27,111,849 | \$39,719,334 | \$34,313,525 | \$12,446,641 | \$183,514,521 |
| 2006 | \$92,676,509 | \$35,017,335 | \$53,095,577 | \$42,857,791 | \$13,481,498 | \$237,128,711 |
| 2007 | \$102,883,195 | \$37,889,011 | \$61,585,393 | \$46,102,562 | \$15,361,507 | \$263,821,668 |
| 2008 | \$114,252,657 | \$42,193,102 | \$72,424,279 | \$51,452,342 | \$17,567,440 | \$297,889,821 |
| Jan-09 | \$8,945,667 | \$3,495,723 | \$6,418,784 | \$3,799,481 | \$1,364,552 | \$24,024,207 |
| Feb-09 | \$8,890,456 | \$3,424,404 | \$6,151,907 | \$3,867,117 | \$1,316,351 | \$23,650,235 |
| Mar-09 | \$10,355,637 | \$3,818,244 | \$6,976,469 | \$4,283,190 | \$1,506,801 | \$26,940,341 |
| Apr-09 | \$9,479,290 | \$3,625,255 | \$6,762,346 | \$4,088,757 | \$1,406,878 | \$25,362,526 |
| May-09 | \$9,527,537 | \$3,623,864 | \$6,553,205 | \$4,105,842 | \$1,451,493 | \$25,261,942 |
| Jun-09 | \$9,803,482 | \$3,718,353 | \$6,873,281 | \$4,080,701 | \$1,503,605 | \$25,979,422 |
| Jul-09 | \$9,699,819 | \$3,929,455 | \$6,866,879 | \$4,146,545 | \$1,497,568 | \$26,140,267 |
| Aug-09 | \$9,687,067 | \$3,803,105 | \$6,906,261 | \$4,271,245 | \$1,533,551 | \$26,201,229 |
| Sep-09 | \$9,970,185 | \$3,892,154 | \$6,943,562 | \$4,278,946 | \$1,541,949 | \$26,626,796 |
| Oct-09 | \$10,851,073 | \$4,036,003 | \$7,229,056 | \$4,618,625 | \$1,681,733 | \$28,416,491 |
| Nov-09 | \$10,300,108 | \$3,779,884 | \$6,857,204 | \$4,451,165 | \$1,694,494 | \$27,082,855 |

* Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

Claims Costs *(continued)*

The following tables represent incurred claims by Plan for 2004-2008 and monthly year-to-date for 2009.

INCURRED MEDICAL CLAIMS (no Rx) by PLAN:

| Time Period | Commonwealth | | | | Capitol Choice | Standard PPO | Maximum Choice | Optimum PPO | Missing* | Total |
|-------------|---------------|-------------|---------------|--------------|----------------|--------------|----------------|--------------|-------------|---------------|
| | Enhanced | Essential | Premier | Select | | | | | | |
| 2005 | \$224,106,646 | \$5,699,906 | \$398,937,012 | \$870 | \$0 | \$0 | \$0 | \$0 | \$3,206,256 | \$631,950,690 |
| 2006 | \$288,475,412 | \$5,444,088 | \$450,349,287 | \$2,662 | \$12,098 | \$2,313 | \$2,001 | \$80,928 | \$3,974,007 | \$748,342,797 |
| 2007 | \$338,717,549 | \$5,049,175 | \$499,351,543 | \$7,241,677 | \$8,146 | \$2,173 | \$10,878 | \$65,746 | \$3,721,482 | \$854,168,370 |
| 2008 | \$378,839,230 | \$5,453,384 | \$549,352,618 | \$12,085,063 | \$189,382 | \$15,440 | \$166,181 | \$1,181,733 | \$3,591,590 | \$950,874,621 |
| Jan-09 | \$31,010 | \$0 | \$76,192 | \$8,652 | \$8,559,650 | \$791,463 | \$2,992,999 | \$63,230,537 | \$213,348 | \$75,903,851 |
| Feb-09 | N/A | N/A | N/A | N/A | \$8,082,652 | \$948,706 | \$2,826,389 | \$62,780,733 | \$189,652 | \$74,828,132 |
| Mar-09 | N/A | N/A | N/A | N/A | \$10,359,719 | \$1,154,644 | \$2,961,517 | \$70,126,072 | \$335,126 | \$84,937,078 |
| Apr-09 | N/A | N/A | N/A | N/A | \$8,611,491 | \$1,067,894 | \$3,598,705 | \$69,461,558 | \$466,273 | \$83,205,921 |
| May-09 | N/A | N/A | N/A | N/A | \$8,081,171 | \$1,462,676 | \$3,499,885 | \$64,077,602 | \$370,702 | \$77,492,036 |
| Jun-09 | N/A | N/A | N/A | N/A | \$9,487,805 | \$1,684,326 | \$3,975,959 | \$75,320,737 | \$368,637 | \$90,837,464 |
| Jul-09 | N/A | N/A | N/A | N/A | \$10,614,107 | \$1,500,549 | \$4,196,287 | \$75,173,144 | \$500,988 | \$91,985,075 |
| Aug-09 | N/A | N/A | N/A | N/A | \$10,142,987 | \$1,189,043 | \$3,624,720 | \$66,927,049 | \$305,349 | \$82,189,149 |
| Sep-09 | N/A | N/A | N/A | N/A | \$9,606,710 | \$1,105,798 | \$3,477,996 | \$69,726,962 | \$401,761 | \$84,319,227 |
| Oct-09 | N/A | N/A | N/A | N/A | \$10,094,763 | \$1,305,054 | \$3,961,595 | \$74,109,076 | \$445,592 | \$89,916,079 |
| Nov-09 | N/A | N/A | N/A | N/A | \$9,279,166 | \$1,121,825 | \$3,777,527 | \$68,830,177 | \$466,737 | \$83,475,433 |

**Missing means the claims could not be tagged to a specific plan.*

Claims Costs *(continued)*

The following tables represent incurred claims by Plan for 2004-2008 and monthly year-to-date for 2009.

INCURRED Rx CLAIMS (no Med) by PLAN:

| | Commonwealth | | | | | | | | | |
|-------------|---------------|-------------|---------------|-------------|----------------|--------------|----------------|--------------|-----------|---------------|
| Time Period | Enhanced | Essential | Premier | Select | Capitol Choice | Standard PPO | Maximum Choice | Optimum PPO | Missing* | Total |
| 2005 | \$54,479,575 | \$1,131,785 | \$97,251,249 | \$22 | \$0 | \$0 | \$0 | \$0 | \$549,273 | \$182,825,330 |
| 2006 | \$86,176,113 | \$1,164,651 | \$148,805,657 | \$185 | \$129 | \$70 | \$460 | \$3,784 | \$977,662 | \$237,128,711 |
| 2007 | \$98,794,003 | \$968,767 | \$162,084,866 | \$1,413,084 | \$252 | \$1,366 | \$0 | \$9,536 | \$484,891 | \$263,756,765 |
| 2008 | \$113,905,555 | \$974,330 | \$180,377,939 | \$1,928,059 | \$11,826 | \$2,371 | \$3,722 | \$83,379 | \$602,641 | \$297,889,821 |
| Jan-09 | \$15,333 | \$11 | \$39,805 | \$2,289 | \$2,658,132 | \$293,458 | \$67,473 | \$20,879,667 | \$68,039 | \$24,024,207 |
| Feb-09 | \$0 | \$0 | \$0 | \$0 | \$2,630,556 | \$274,410 | \$196,677 | \$20,493,753 | \$54,840 | \$23,650,235 |
| Mar-09 | \$0 | \$0 | \$0 | \$0 | \$3,128,369 | \$299,051 | \$352,404 | \$23,107,281 | \$53,235 | \$26,940,341 |
| Apr-09 | \$0 | \$0 | \$0 | \$0 | \$2,856,968 | \$329,472 | \$464,075 | \$21,670,553 | \$41,459 | \$25,362,526 |
| May-09 | \$0 | \$0 | \$0 | \$0 | \$2,858,523 | \$301,442 | \$557,274 | \$21,496,660 | \$48,043 | \$25,261,942 |
| Jun-09 | \$0 | \$0 | \$0 | \$0 | \$3,032,353 | \$302,541 | \$664,369 | \$21,916,256 | \$63,903 | \$25,979,422 |
| Jul-09 | \$0 | \$0 | \$0 | \$0 | \$2,971,207 | \$280,834 | \$719,812 | \$22,119,721 | \$48,692 | \$26,140,267 |
| Aug-09 | \$0 | \$0 | \$0 | \$0 | \$2,974,700 | \$294,618 | \$761,178 | \$22,109,111 | \$61,623 | \$26,201,229 |
| Sep-09 | \$0 | \$0 | \$0 | \$0 | \$3,006,650 | \$295,493 | \$874,380 | \$22,400,661 | \$49,611 | \$26,626,796 |
| Oct-09 | \$0 | \$0 | \$0 | \$0 | \$3,189,604 | \$311,307 | \$937,667 | \$23,926,048 | \$51,865 | \$28,416,491 |
| Nov-09 | \$0 | \$0 | \$0 | \$0 | \$3,140,501 | \$284,784 | \$959,516 | \$22,631,130 | \$66,924 | \$27,082,855 |

**Missing means the claims could not be tagged to a specific plan.*

Claims Costs *(continued)*

The following represents incurred medical claims only (does not include Rx) by Coverage Level for 2004-2008 and monthly year-to-date for 2009.

INCURRED MEDICAL CLAIMS (no Rx) by Coverage Level:

| Time Period | Couple | Family | Parent Plus | Single | Unknown* | Total |
|--------------------|---------------|---------------|--------------------|---------------|-----------------|---------------|
| 2004 | \$79,155,863 | \$103,820,755 | \$86,067,017 | \$316,270,259 | \$5,091,095 | \$590,404,989 |
| 2005 | \$87,262,576 | \$118,825,706 | \$89,324,478 | \$333,524,271 | \$3,206,647 | \$632,143,678 |
| 2006 | \$105,900,696 | \$142,637,212 | \$104,245,315 | \$391,585,566 | \$3,974,007 | \$748,342,797 |
| 2007 | \$123,989,294 | \$160,349,021 | \$118,430,067 | \$447,682,122 | \$3,721,482 | \$854,171,987 |
| 2008 | \$138,530,865 | \$179,343,850 | \$138,998,642 | \$490,408,617 | \$3,592,647 | \$950,874,621 |
| Jan-09 | \$10,797,704 | \$13,843,904 | \$12,384,811 | \$38,664,084 | \$213,348 | \$75,903,851 |
| Feb-09 | \$11,550,701 | \$14,162,487 | \$11,152,007 | \$37,773,725 | \$189,212 | \$74,828,132 |
| Mar-09 | \$12,492,319 | \$16,323,758 | \$12,440,723 | \$43,354,390 | \$325,888 | \$84,937,078 |
| Apr-09 | \$13,343,774 | \$15,861,944 | \$11,174,323 | \$42,375,924 | \$449,957 | \$83,205,921 |
| May-09 | \$11,456,503 | \$14,996,283 | \$10,550,131 | \$40,139,635 | \$349,485 | \$77,492,036 |
| Jun-09 | \$13,036,184 | \$17,643,764 | \$12,695,287 | \$47,118,831 | \$343,398 | \$90,837,464 |
| Jul-09 | \$12,589,160 | \$17,358,196 | \$13,769,864 | \$47,766,867 | \$500,988 | \$91,985,075 |
| Aug-09 | \$12,264,370 | \$16,310,468 | \$11,943,564 | \$41,365,398 | \$305,349 | \$82,189,149 |
| Sep-09 | \$12,862,513 | \$16,412,831 | \$12,130,452 | \$42,511,669 | \$401,761 | \$84,319,227 |
| Oct-09 | \$12,098,155 | \$18,214,109 | \$12,856,960 | \$46,301,356 | \$445,498 | \$89,916,079 |
| Nov-09 | \$12,161,896 | \$15,661,761 | \$11,974,025 | \$43,211,014 | \$466,737 | \$83,475,433 |

**Unable to tag claims to a specific coverage level*

Claims Costs *(continued)*

The following represents incurred medical claims only (does not include Rx) by Coverage Level for 2004-2008 and monthly year-to-date for 2009.

INCURRED Rx CLAIMS (no Med) by Coverage Level:

| Time Period | Couple | Family | Parent Plus | Single | Unknown* | Total |
|--------------------|---------------|---------------|--------------------|---------------|-----------------|---------------|
| 2004 | \$25,937,109 | \$29,646,733 | \$19,042,131 | \$93,046,913 | \$824,066 | \$168,496,952 |
| 2005 | \$28,909,801 | \$34,195,948 | \$19,163,801 | \$99,866,288 | \$689,492 | \$182,825,330 |
| 2006 | \$38,228,159 | \$43,809,856 | \$25,948,520 | \$128,164,514 | \$977,662 | \$237,128,711 |
| 2007 | \$42,590,719 | \$49,329,230 | \$29,736,616 | \$141,680,238 | \$484,865 | \$263,821,668 |
| 2008 | \$48,557,010 | \$54,563,076 | \$34,743,899 | \$159,452,624 | \$573,213 | \$297,889,821 |
| Jan-09 | \$3,996,465 | \$4,206,100 | \$2,817,447 | \$12,938,852 | \$65,342 | \$24,024,207 |
| Feb-09 | \$3,878,073 | \$4,295,781 | \$2,835,166 | \$12,592,283 | \$48,932 | \$23,650,235 |
| Mar-09 | \$4,381,315 | \$4,886,740 | \$3,354,945 | \$14,268,418 | \$48,923 | \$26,940,341 |
| Apr-09 | \$4,205,075 | \$4,630,434 | \$2,919,108 | \$13,569,267 | \$38,642 | \$25,362,526 |
| May-09 | \$4,180,027 | \$4,717,186 | \$2,822,963 | \$13,500,722 | \$41,043 | \$25,261,942 |
| Jun-09 | \$4,352,304 | \$4,778,516 | \$2,890,761 | \$13,900,836 | \$57,005 | \$25,979,422 |
| Jul-09 | \$4,383,037 | \$4,839,240 | \$2,932,828 | \$13,939,313 | \$45,849 | \$26,140,267 |
| Aug-09 | \$4,282,388 | \$5,025,079 | \$2,970,964 | \$13,869,261 | \$53,537 | \$26,201,229 |
| Sep-09 | \$4,280,820 | \$5,217,151 | \$3,142,470 | \$13,939,663 | \$46,691 | \$26,626,796 |
| Oct-09 | \$4,604,421 | \$5,674,276 | \$3,452,888 | \$14,636,494 | \$48,413 | \$28,416,491 |
| Nov-09 | \$4,261,037 | \$5,285,613 | \$3,344,783 | \$14,124,961 | \$66,461 | \$27,082,855 |

**Unable to tag claims to a specific coverage level*

Medical Claims Utilization

The following is based on medical claims* (does not include Rx) incurred for Jan-Nov 2009.

| Commonwealth Plan | Admits Per 1000 Acute | Admits Per 1000 Acute {Rcnt SGovt} | %Diff from {Rcnt SGovt} | Days LOS Admit Acute | Days LOS Admit Acute {Rcnt SGovt} | %Diff from {Rcnt SGovt} | Days Per 1000 Adm Acute | Days Per 1000 Adm Acute {Rcnt SGovt} | %Diff from {Rcnt SGovt} |
|-------------------|-----------------------|------------------------------------|-------------------------|----------------------|-----------------------------------|-------------------------|-------------------------|--------------------------------------|-------------------------|
| Capitol Choice | 68.72 | 79.82 | -13.90% | 3.77 | 4.01 | -6.04% | 258.93 | 311.64 | -16.91% |
| Maximum Choice | 53.16 | 65.66 | -19.03% | 3.76 | 4.09 | -8.07% | 199.77 | 241.96 | -17.44% |
| Optimum PPO | 91.97 | 76.15 | 20.78% | 4.01 | 4.33 | -7.27% | 369.17 | 303.54 | 21.62% |
| Standard PPO | 76.96 | 74.39 | 3.45% | 4.55 | 4.58 | -0.86% | 349.8 | 299.24 | 16.90% |
| Total | 72.70 | 74.01 | -1.76% | 4.02 | 4.25 | -5.41% | 294.42 | 289.10 | 1.84% |

| Commonwealth Plan | Visits Per 1000 Office Med | Visits Per 1000 Office Med {Rcnt SGovt} | %Diff from {Rcnt SGovt} | Visits Per 1000 ER | Visits Per 1000 ER {Rcnt SGovt} | %Diff from {Rcnt SGovt} |
|-------------------|----------------------------|---|-------------------------|--------------------|---------------------------------|-------------------------|
| Capitol Choice | 7,458.13 | 8,140.82 | -8.39% | 182.75 | 217.86 | -16.11% |
| Maximum Choice | 5,827.46 | 6,765.81 | -13.87% | 169.6 | 218.06 | -22.23% |
| Optimum PPO | 9,700.29 | 8,038.87 | 20.67% | 243.58 | 215.52 | 13.02% |
| Standard PPO | 5,231.06 | 7,768.42 | -32.66% | 234.82 | 214.22 | 9.61% |
| Total | 7,054.24 | 7,678.48 | -8.56% | 207.69 | 216.42 | -3.93% |

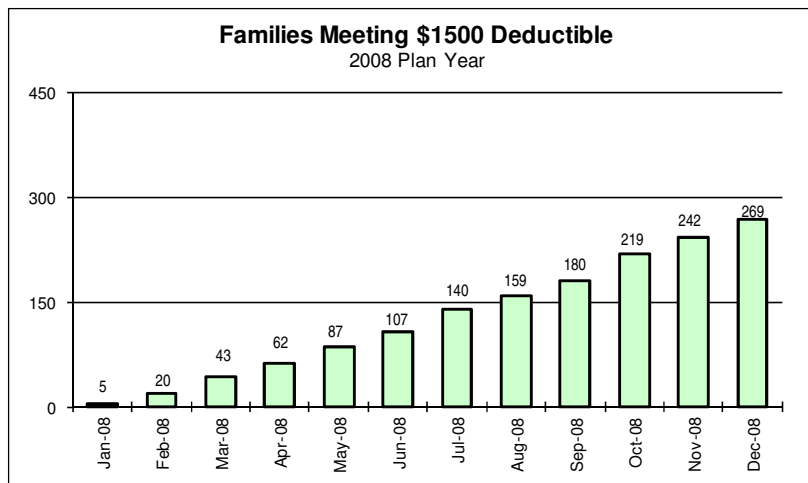
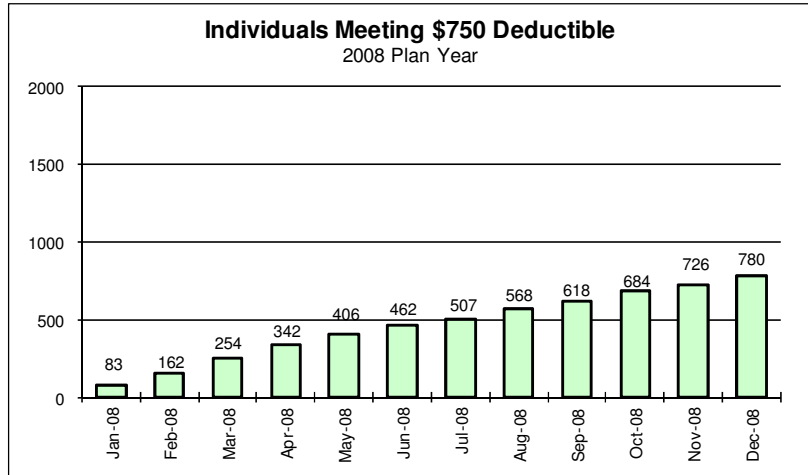
| Commonwealth Plan | Svcs Per 1000 OP Lab | Svcs Per 1000 OP Lab {Rcnt US} | %Diff from {Rcnt US} | Svcs Per 1000 OP Rad | Svcs Per 1000 OP Rad {Rcnt US} | %Diff from {Rcnt US} |
|-------------------|----------------------|--------------------------------|----------------------|----------------------|--------------------------------|----------------------|
| Capitol Choice | 7,891.45 | 7,124.59 | 10.76% | 2,716.67 | 2,343.88 | 15.90% |
| Maximum Choice | 5,832.15 | 5,480.64 | 6.41% | 1,809.69 | 1,670.89 | 8.31% |
| Optimum PPO | 10,508.13 | 6,826.09 | 53.94% | 3,504.63 | 2,291.60 | 52.93% |
| Standard PPO | 6,180.37 | 6,708.82 | -7.88% | 2,074.59 | 2,165.21 | -4.19% |
| Total | 7,603.03 | 6,535.04 | 15.81% | 2,526.40 | 2,117.90 | 18.24% |

*Services are tracked by each service, not by each visit. Therefore, if two laboratory services are performed at one visit, it will count as two services.

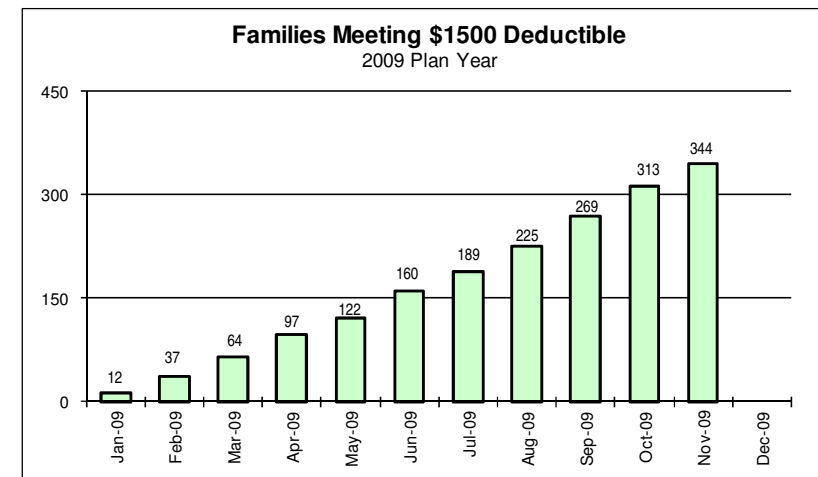
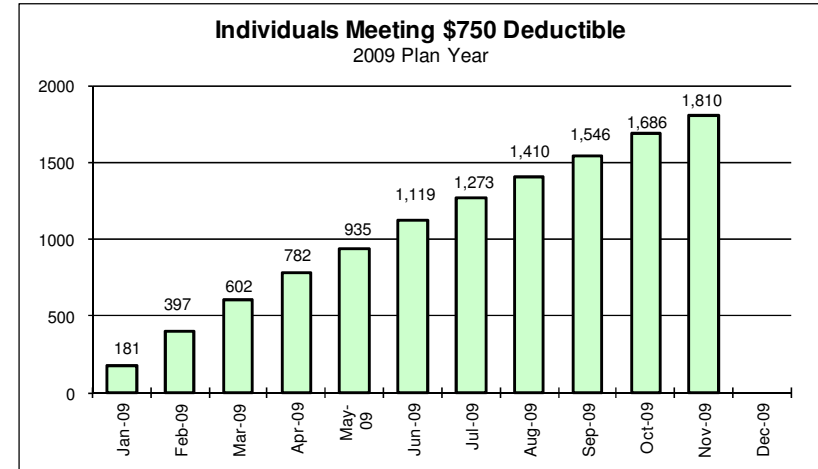
Analysis of Individuals and Families Meeting Their Deductibles

The following details the number of individuals and families by plan that met their deductible for the 2008 and 2009 Plan Years. This report is based on incurred claims.

Commonwealth Essential



Standard PPO



Individuals and Families in Essential Plan

| | | | | |
|-------|---------------|--------------------|---------------|------------------------------------|
| 2005: | 18.58% | of Individuals and | 11.69% | of Families met their Deductibles. |
| 2006: | 22.14% | of Individuals and | 16.35% | of Families met their Deductibles. |
| 2007: | 22.41% | of Individuals and | 17.70% | of Families met their Deductibles. |
| 2008: | 24.25% | of Individuals and | 19.35% | of Families met their Deductibles. |

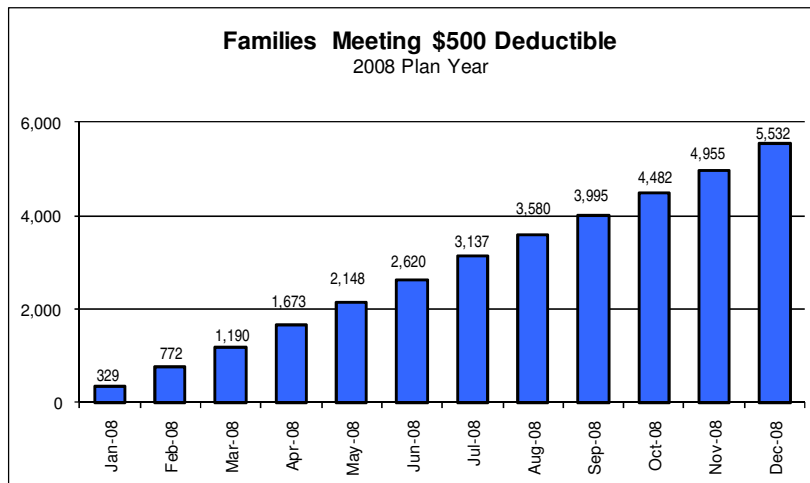
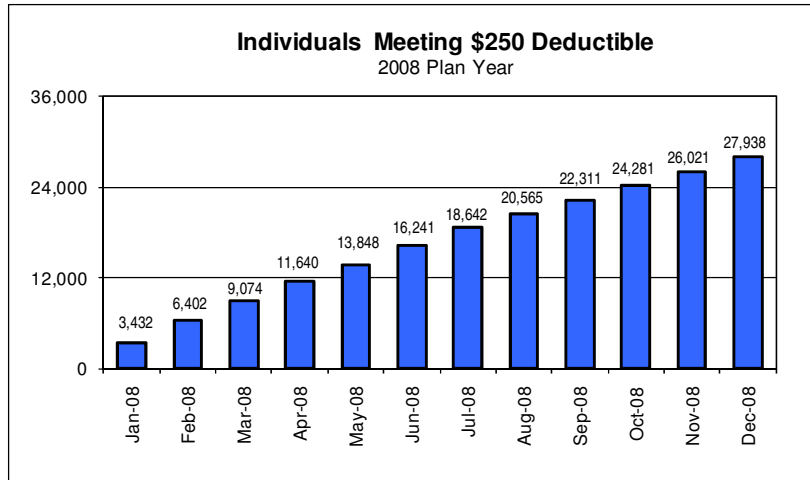
Individuals and Families in Standard PPO Plan

| | | | | |
|------|---------------|--------------------|--------------|------------------------------------|
| 2009 | 29.76% | of Individuals and | 7.94% | of Families met their Deductibles. |
| | | | | |
| | | | | |
| | | | | |

Analysis of Individuals and Families Meeting Their Deductibles *(continued)*

The following details the number of individuals and families by plan that met their deductible for the 2008 and 2009 Plan Years. This report is based on incurred claims.

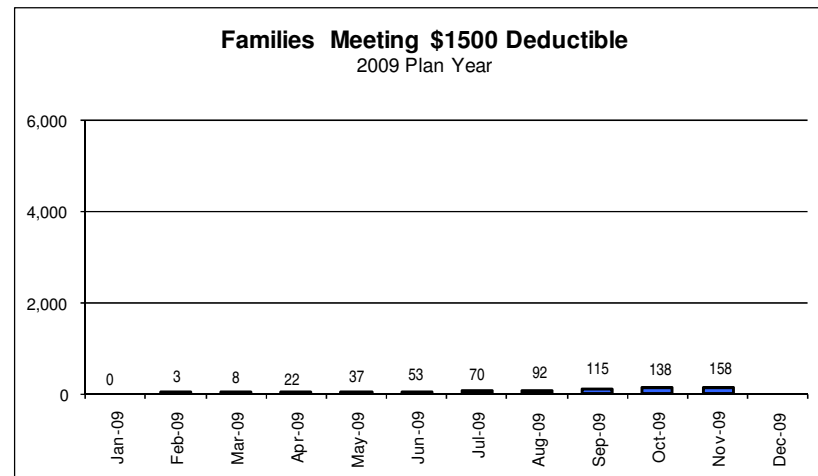
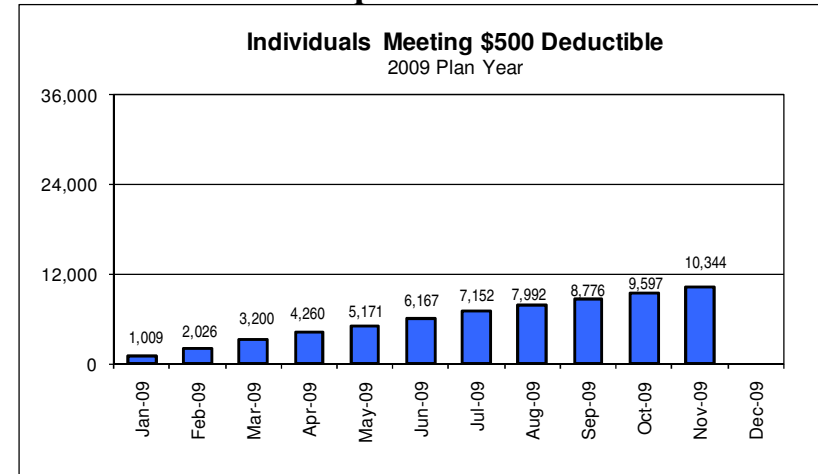
Commonwealth Enhanced



Individuals and Families in Enhanced Plan

| | | | | |
|-------|---------------|--------------------|--------------|------------------------------------|
| 2005: | 19.30% | of Individuals and | 4.64% | of Families met their Deductibles. |
| 2006: | 21.52% | of Individuals and | 7.23% | of Families met their Deductibles. |
| 2007: | 21.31% | of Individuals and | 6.45% | of Families met their Deductibles. |
| 2008: | 21.95% | of Individuals and | 6.69% | of Families met their Deductibles. |

Capitol Choice



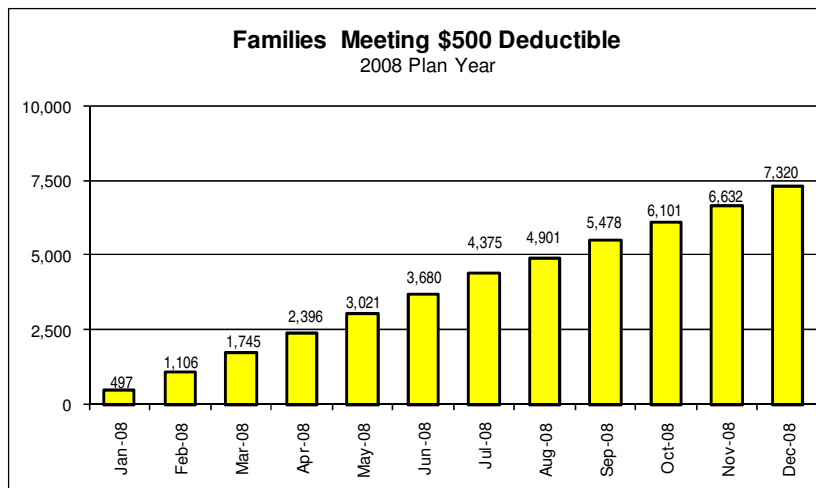
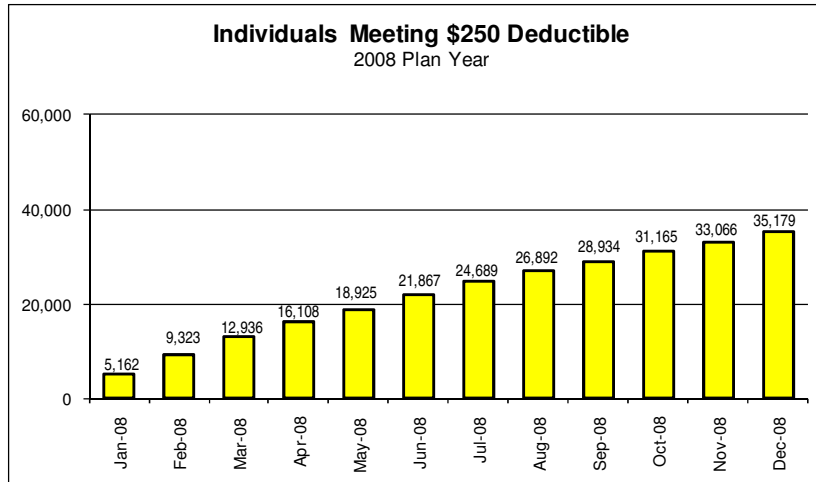
Individuals and Families in Capitol Choice Plan

| | | | | |
|-------|---------------|--------------------|--------------|------------------------------------|
| 2009: | 26.09% | of Individuals and | 0.50% | of Families met their Deductibles. |
| | | | | |
| | | | | |
| | | | | |

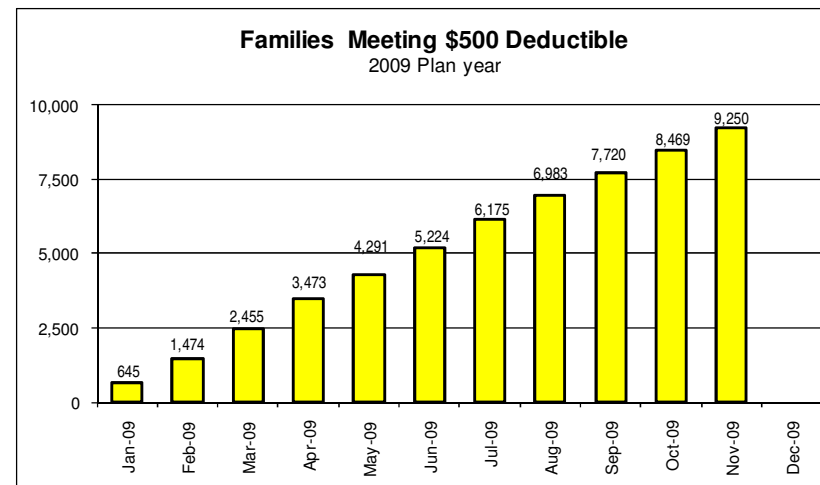
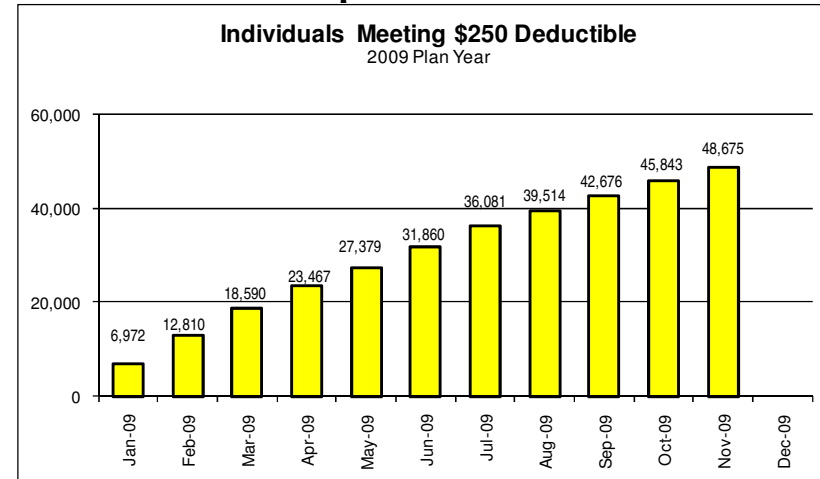
Analysis of Individuals and Families Meeting Their Deductibles *(continued)*

The following details the number of individuals and families by plan that met their deductible for the 2008 and 2009 Plan Years. This report is based on incurred claims.

Commonwealth Premier



Optimum PPO



Individuals and Families in Premier Plan

| | | | | |
|-------|---------------|--------------------|--------------|------------------------------------|
| 2005: | 27.80% | of Individuals and | 6.72% | of Families met their Deductibles. |
| 2006: | 30.15% | of Individuals and | 9.95% | of Families met their Deductibles. |
| 2007: | 30.04% | of Individuals and | 8.93% | of Families met their Deductibles. |
| 2008: | 30.52% | of Individuals and | 9.07% | of Families met their Deductibles. |

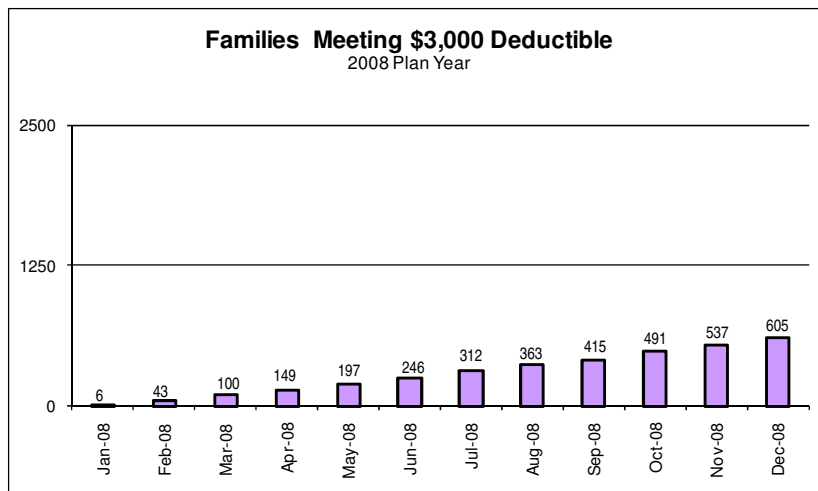
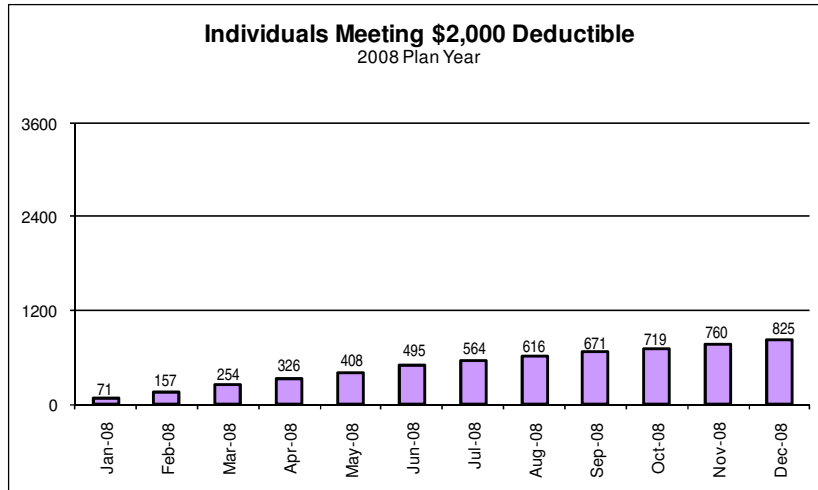
Individuals and Families in Optimum PPO Plan

| | | | | |
|-------|---------------|--------------------|--------------|------------------------------------|
| 2009: | 25.58% | of Individuals and | 7.78% | of Families met their Deductibles. |
|-------|---------------|--------------------|--------------|------------------------------------|

Analysis of Individuals and Families Meeting Their Deductibles *(continued)*

The following details the number of individuals and families by plan that met their deductible for the 2008 and 2009 Plan Years. This report is based on incurred claims.

Commonwealth Select



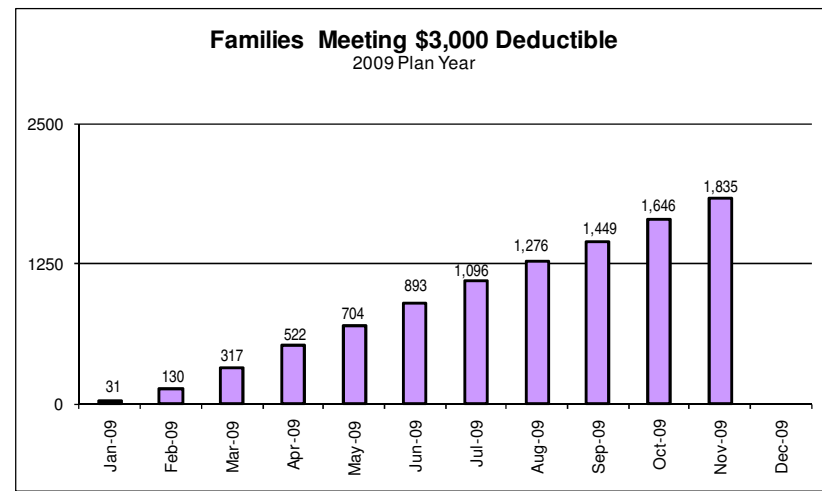
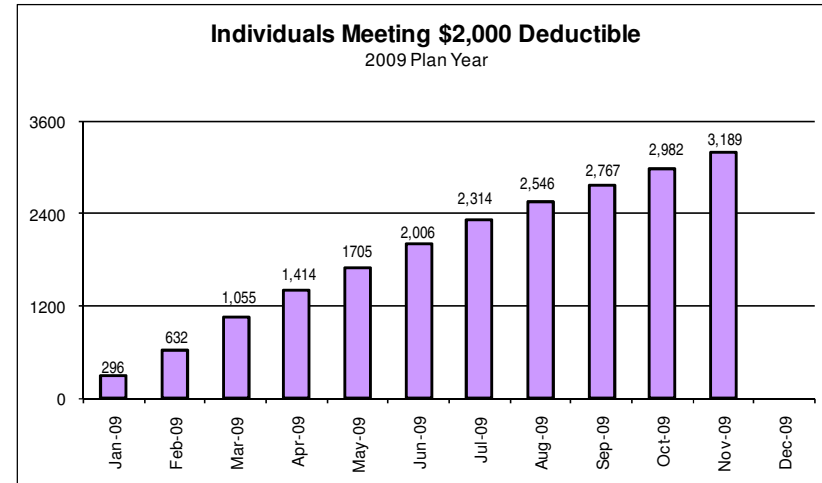
Individuals and Families in Select Plan

2007: **11.72%** of Individuals and **18.50%** of Families met their Deductibles.

2008: **12.81%** of Individuals and **20.03%** of Families met their Deductibles.

Note: For the Select Plan only, prescription drug coinsurance amounts are included in MOP totals

Maximum Choice



Individuals and Families in Maximum Choice Plan

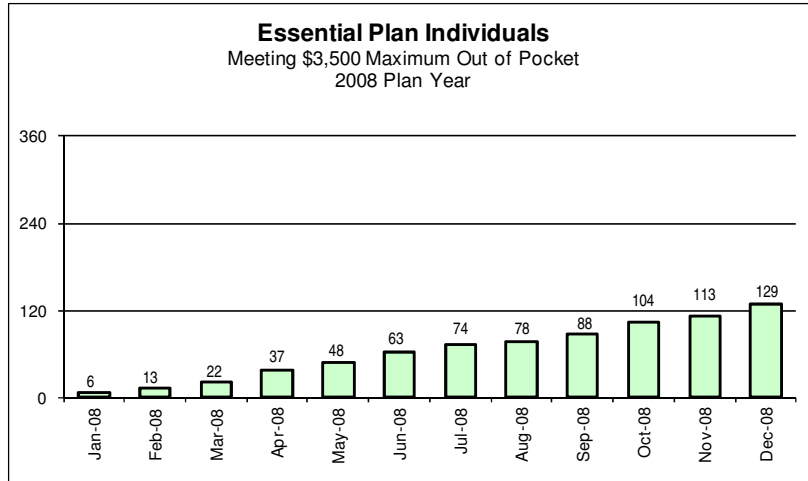
2009: **14.00%** of Individuals and **14.51%** of Families met their Deductibles.

Note: For the Maximum Choice Plan only, prescription drug coinsurance amounts are included in MOP totals

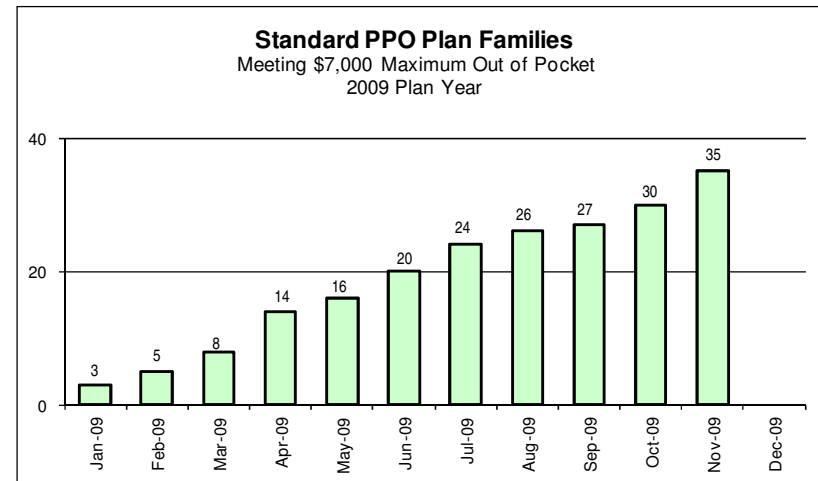
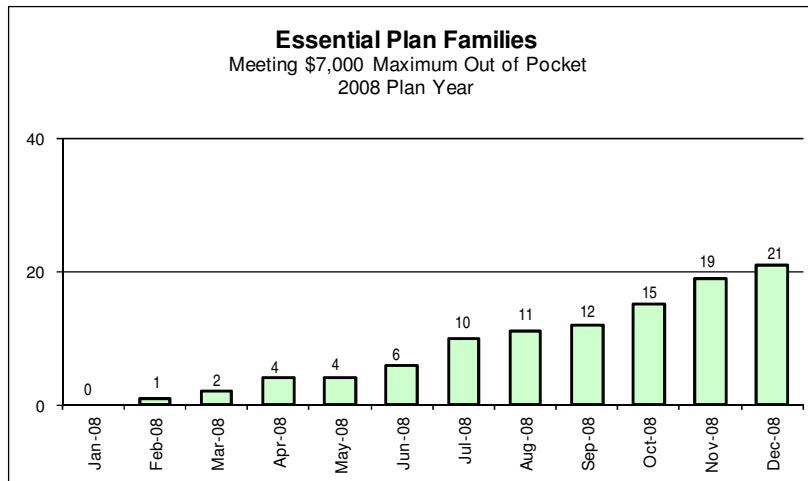
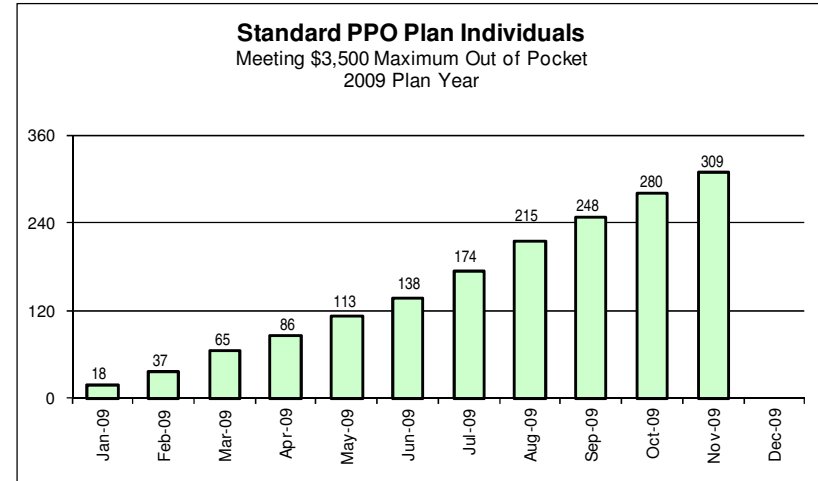
Analysis of Individuals and Families Meeting Their Maximum Out of Pocket Expenses *(continued)*

The following details the number of individuals and families by plan that met their maximum out of pocket for the 2008 and 2009 Plan Years. This report is based on incurred claims.

Commonwealth Essential



Standard PPO



Individuals and Families in Essential Plan

| | | | | |
|-------|--------------|--------------------|--------------|------------------------------------|
| 2005: | 1.14% | of Individuals and | 0.22% | of Families met their Deductibles. |
| 2006: | 2.96% | of Individuals and | 1.08% | of Families met their Deductibles. |
| 2007: | 3.30% | of Individuals and | 1.16% | of Families met their Deductibles. |
| 2008: | 4.01% | of Individuals and | 1.51% | of Families met their Deductibles. |

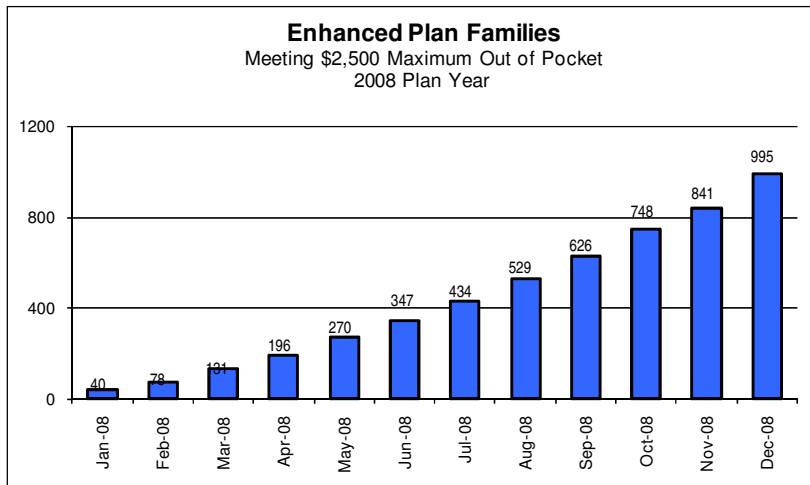
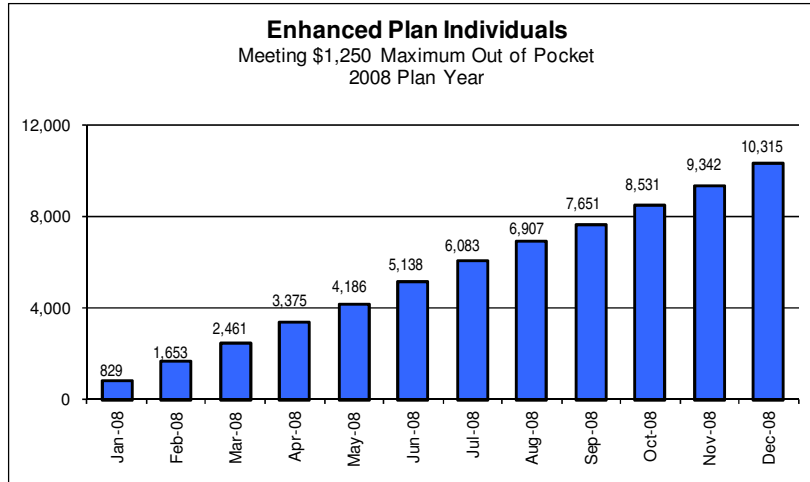
Individuals and Families in Standard PPO Plan

| | | | | |
|-------|--------------|--------------------|--------------|------------------------------------|
| 2009: | 5.08% | of Individuals and | 0.81% | of Families met their Deductibles. |
| | | | | |
| | | | | |
| | | | | |

Analysis of Individuals and Families Meeting Their Maximum Out of Pocket Expenses *(continued)*

The following details the number of individuals and families by plan that met their maximum out of pocket for the 2008 and 2009 Plan Years. This report is based on incurred claims.

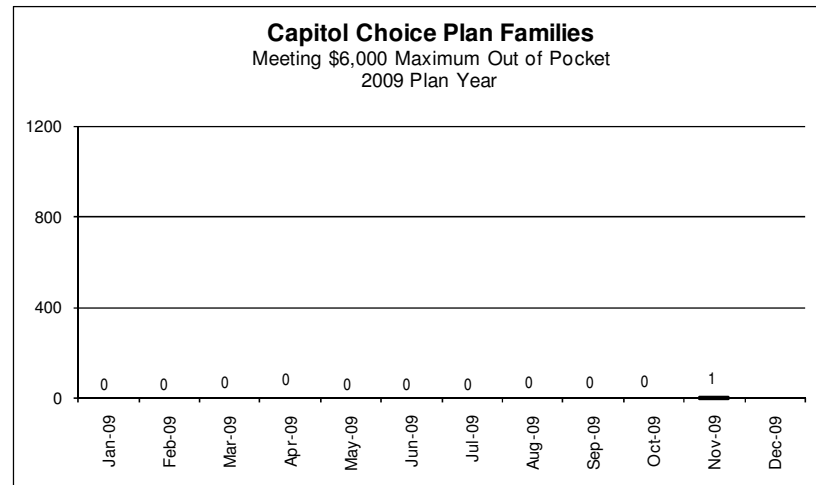
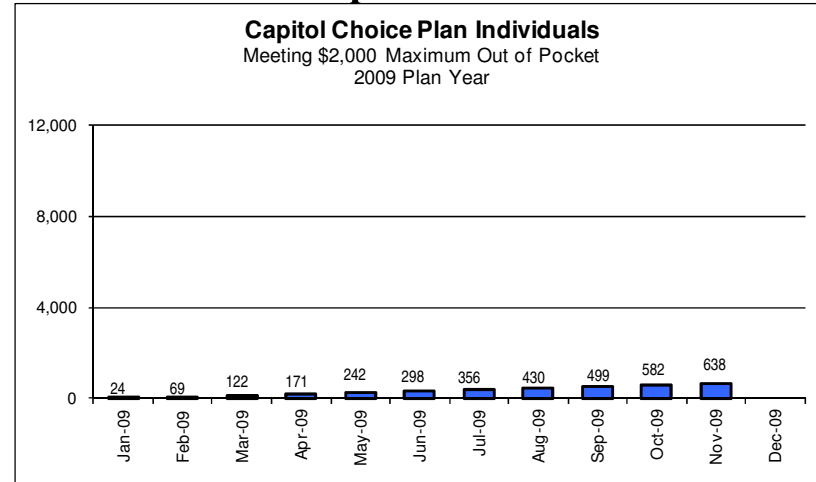
Commonwealth Enhanced



Individuals and Families in Enhanced Plan

| | | | | |
|-------|--------------|--------------------|--------------|------------------------------------|
| 2005: | 3.33% | of Individuals and | 0.31% | of Families met their Deductibles. |
| 2006: | 5.80% | of Individuals and | 0.94% | of Families met their Deductibles. |
| 2007: | 7.48% | of Individuals and | 1.00% | of Families met their Deductibles. |
| 2008: | 8.11% | of Individuals and | 1.20% | of Families met their Deductibles. |

Capitol Choice



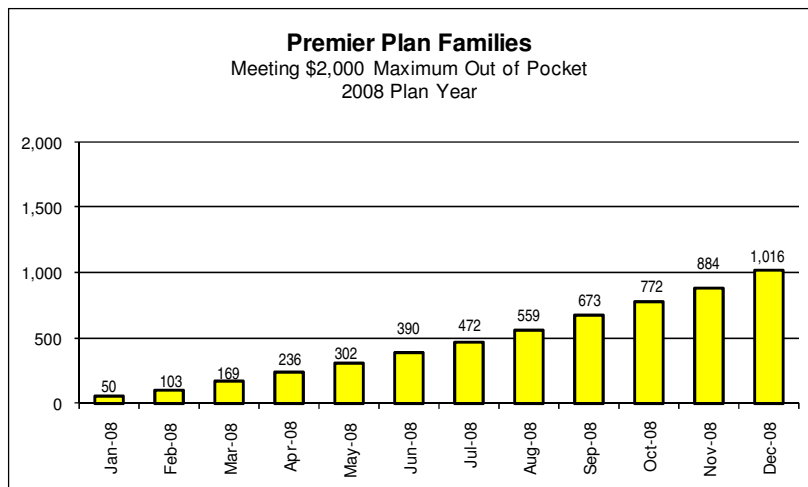
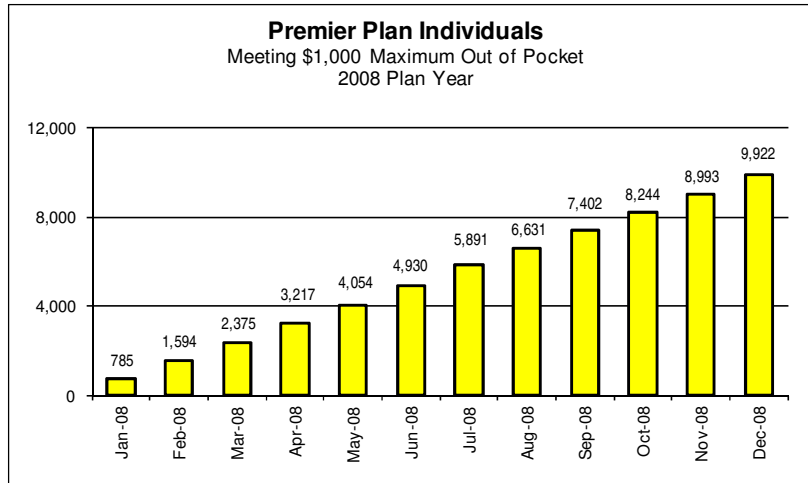
Individuals and Families in Capitol Choice Plan

| | | | | |
|-------|--------------|--------------------|--------------|------------------------------------|
| 2009: | 1.61% | of Individuals and | 0.00% | of Families met their Deductibles. |
|-------|--------------|--------------------|--------------|------------------------------------|

Analysis of Individuals and Families Meeting Their Maximum Out of Pocket Expenses *(continued)*

The following details the number of individuals and families by plan that met their maximum out of pocket for the 2008 and 2009 Plan Years. This report is based on incurred claims.

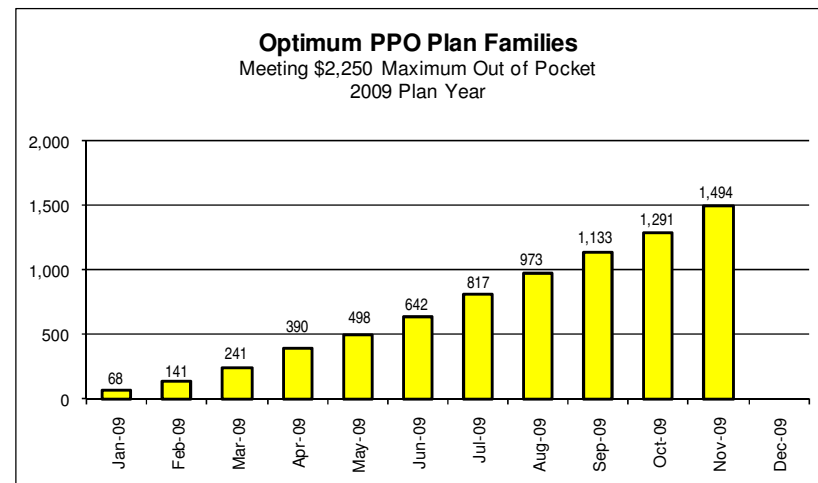
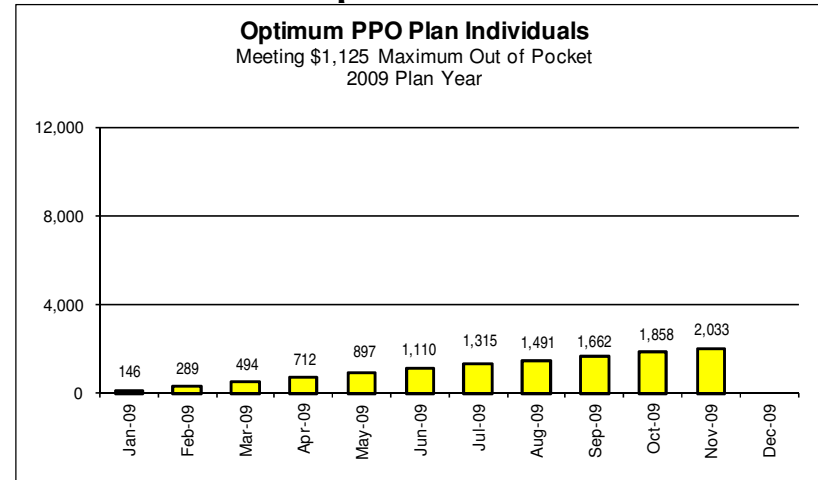
Commonwealth Premier



Individuals and Families in Premier Plan

| | | | | |
|-------|--------------|--------------------|--------------|------------------------------------|
| 2005: | 3.38% | of Individuals and | 0.54% | of Families met their Deductibles. |
| 2006: | 6.70% | of Individuals and | 1.17% | of Families met their Deductibles. |
| 2007: | 7.78% | of Individuals and | 1.20% | of Families met their Deductibles. |
| 2008: | 8.61% | of Individuals and | 1.26% | of Families met their Deductibles. |

Optimum PPO



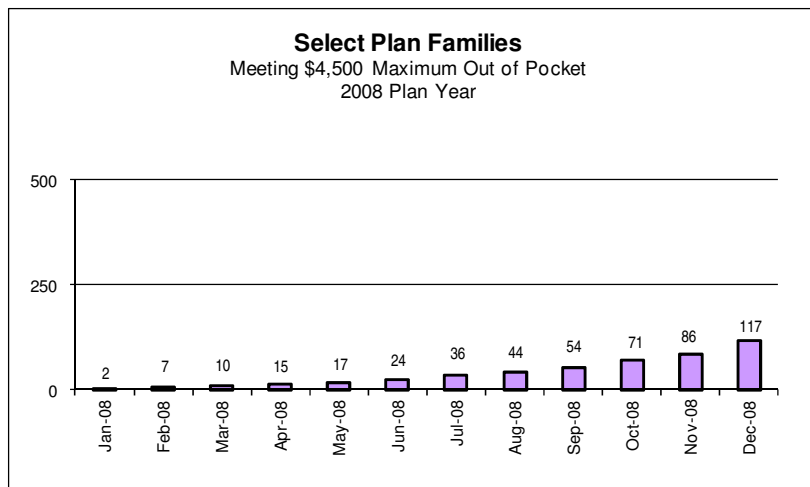
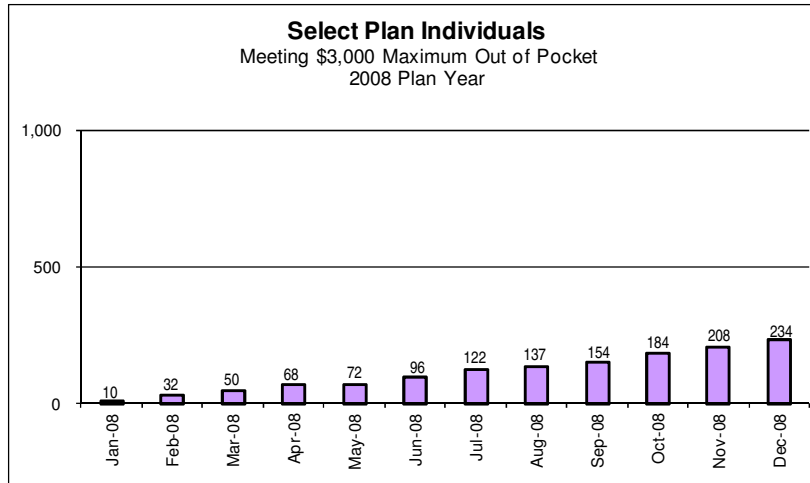
Individuals and Families in Premier Plan

| | | | | |
|-------|--------------|--------------------|--------------|------------------------------------|
| 2009: | 1.07% | of Individuals and | 1.26% | of Families met their Deductibles. |
| | | | | |
| | | | | |
| | | | | |

Analysis of Individuals and Families Meeting Their Maximum Out of Pocket Expenses *(continued)*

The following details the number of individuals and families by plan that met their maximum out of pocket for the 2008 and 2009 Plan Years. This report is based on incurred claims.

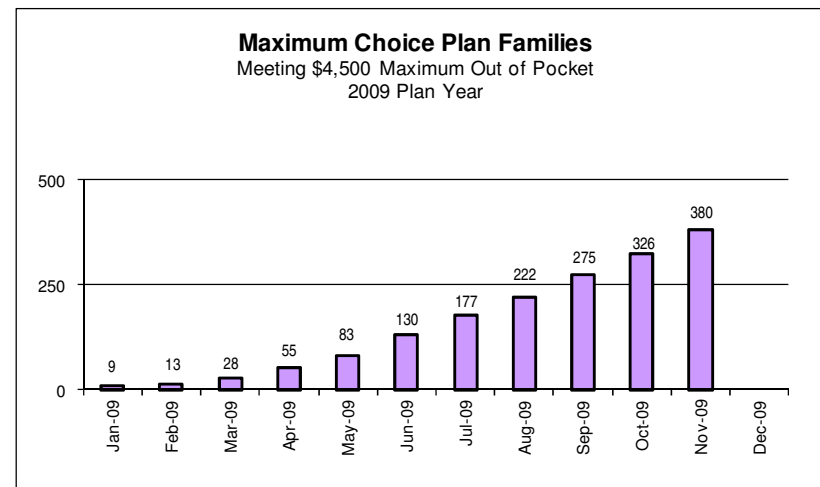
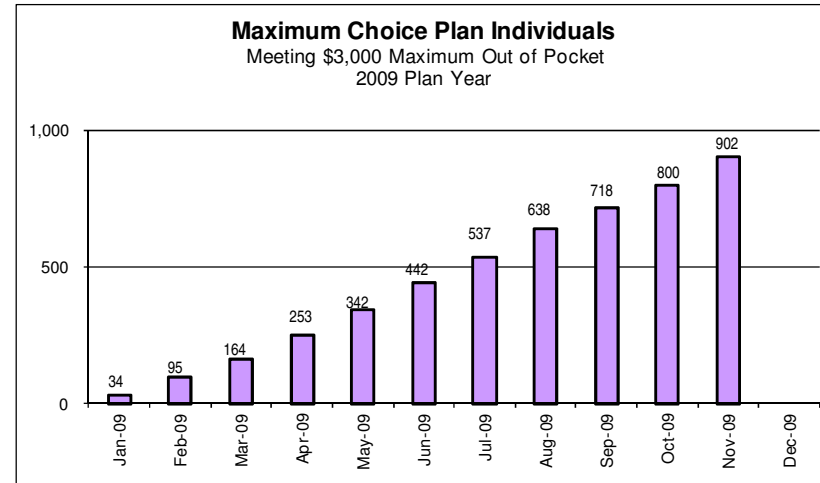
Commonwealth Select



Individuals and Families in Select Plan

| | | | | |
|-------|--------------|--------------------|--------------|------------------------------------|
| 2007: | 3.01% | of Individuals and | 2.61% | of Families met their Deductibles. |
| 2008: | 3.63% | of Individuals and | 3.87% | of Families met their Deductibles. |
| | | | | |
| | | | | |

Maximum Choice



Individuals and Families in Maximum Choice Plan

| | | | | |
|-------|--------------|--------------------|--------------|------------------------------------|
| 2009: | 3.96% | of Individuals and | 3.00% | of Families met their Deductibles. |
| | | | | |
| | | | | |
| | | | | |

Premium (or Premium Equivalent)

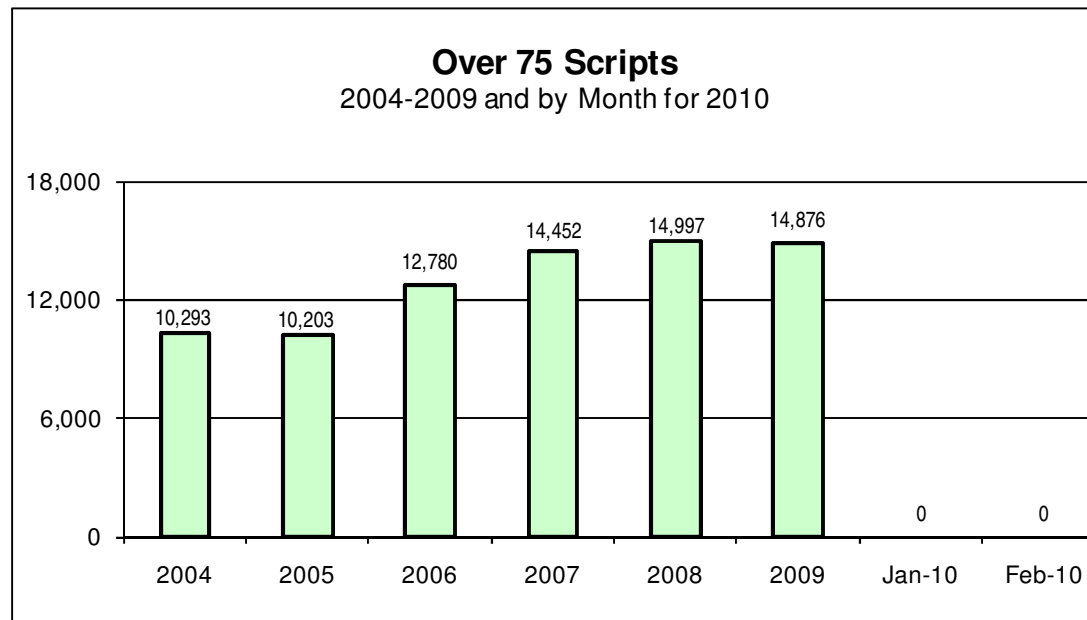
The following details the amount of premium* (or premium equivalent) paid by the employee and employer for 2004-2008 and monthly through 2009.

| Time Period | Employee Premium Amount | Employer Premium Amount | Total Premium Amount |
|--------------------|--------------------------------|--------------------------------|-----------------------------|
| 2004 | \$213,004,714 | \$492,025,888 | \$705,030,602 |
| 2005 | \$143,746,542 | \$808,691,861 | \$952,438,403 |
| 2006 | \$153,787,780 | \$948,458,338 | \$1,102,246,118 |
| 2007 | \$153,512,327 | \$892,677,935 | \$1,046,190,262 |
| 2008 | \$179,094,322 | \$1,039,574,462 | \$1,218,668,784 |
| 2009 | \$210,980,360 | \$1,190,104,292 | \$1,401,084,653 |
| Jan-10 | \$18,786,789 | \$110,921,127 | \$129,707,916 |
| Feb-10 | \$18,809,835 | \$110,909,926 | \$129,719,761 |

**Premium (or premium equivalent) is based on enrollment using published premium rates—it is NOT based on actual payments received.*

Prescription Drug Utilization

The following details the number of families that have purchased 75 scripts or more during 2004-2008 and by month for 2009. After a family has filled 75 prescriptions via retail purchase, the co-payment is reduced to \$20 for 2nd tier and \$40 for 3rd tier.



The table below summarizes plan impact for families regarding the scripts benefit in 2009:

| Script Count, per Family | Number of Families | Number of Scripts | Avg. # of Scripts per Patient | Avg. Net Payment per Script | Net Payments For All Scripts |
|--------------------------|--------------------|-------------------|-------------------------------|-----------------------------|------------------------------|
| 0 - 75 | 113,596 | 700,913 | 4.66 | \$60.60 | \$42,477,205 |
| over 75 | 0 | 0 | 0.00 | \$0.00 | \$0.00 |
| Total | 113,596 | 700,913 | 4.66 | \$60.60 | \$42,477,205 |

Prescription Drug Utilization *(continued)*

The following details the type of prescription filled, the percent that were generic, and the generic efficiency rate for the most recent rolling year. Based on paid claims..

| Time Period | Generic | Brand Name, Generic Available | Brand Name | Other* | Total | Scripts Rx % Generic | Scripts Generic Efficiency Rx |
|--------------------|----------------|--|-------------------|---------------|--------------|---------------------------------|--|
| Mar-09 | 344,553 | 29,152 | 134,215 | 15,348 | 523,268 | 65.85% | 92.20% |
| Apr-09 | 260,728 | 22,101 | 99,712 | 11,535 | 394,076 | 66.16% | 92.19% |
| May-09 | 255,941 | 18,540 | 100,156 | 11,400 | 386,037 | 66.30% | 93.25% |
| Jun-09 | 325,673 | 20,131 | 131,545 | 15,379 | 492,728 | 66.10% | 94.18% |
| Jul-09 | 248,926 | 14,185 | 100,782 | 12,144 | 376,037 | 66.20% | 94.61% |
| Aug-09 | 254,566 | 14,189 | 102,123 | 12,605 | 383,483 | 66.38% | 94.72% |
| Sep-09 | 333,351 | 18,246 | 133,737 | 18,565 | 503,899 | 66.15% | 94.81% |
| Oct-09 | 275,517 | 15,336 | 111,615 | 15,366 | 417,834 | 65.94% | 94.73% |
| Nov-09 | 281,841 | 15,513 | 111,415 | 16,722 | 425,491 | 66.24% | 94.78% |
| Dec-09 | 342,189 | 18,188 | 127,864 | 19,526 | 507,767 | 67.39% | 94.95% |
| Jan-10 | 274,601 | 14,635 | 101,442 | 14,897 | 405,575 | 67.71% | 94.94% |
| Feb-10 | 281,811 | 15,729 | 101,307 | 14,604 | 413,451 | 68.16% | 94.71% |

**Includes: Over the Counter (usually items such as diabetic supplies, syringes, and test strips, etc.), Other/Unavailable or Missing (Unable to tag to a specific group).*

Prescription Drug Utilization *(continued)*

The following details the number of members and patients utilizing prescription benefits and the associated costs for the most recent rolling year. Based on Incurred Claims.

| Time Period | Members | Patients | Scripts | Scripts Per Member | Scripts Per Patient | Allow Amt* Per Script | Net Pay Per Script | Member Cost Per Script | Patient Cost Per Script |
|--------------------|----------------|-----------------|----------------|---------------------------|----------------------------|------------------------------|---------------------------|-------------------------------|--------------------------------|
| Dec-08 | 253,976 | 164,528 | 462,449 | 1.81 | 3.26 | \$71.40 | \$62.21 | \$16.73 | \$25.83 |
| Jan-09 | 254,764 | 159,977 | 416,297 | 1.62 | 3.05 | \$70.89 | \$57.71 | \$21.54 | \$34.31 |
| Feb-09 | 255,233 | 162,000 | 407,481 | 1.59 | 2.96 | \$70.84 | \$58.04 | \$20.44 | \$32.20 |
| Mar-09 | 255,966 | 171,277 | 463,467 | 1.80 | 3.15 | \$70.58 | \$58.13 | \$22.55 | \$33.70 |
| Apr-09 | 256,288 | 164,739 | 427,313 | 1.66 | 3.07 | \$71.51 | \$59.35 | \$20.27 | \$31.53 |
| May-09 | 256,558 | 162,328 | 423,272 | 1.64 | 3.06 | \$71.61 | \$59.68 | \$19.69 | \$31.11 |
| Jun-09 | 256,758 | 163,069 | 422,087 | 1.63 | 3.10 | \$73.32 | \$61.55 | \$19.36 | \$30.48 |
| Jul-09 | 256,600 | 163,924 | 420,481 | 1.63 | 3.11 | \$73.68 | \$62.17 | \$18.87 | \$29.53 |
| Aug-09 | 256,661 | 164,307 | 422,939 | 1.63 | 3.07 | \$73.27 | \$61.95 | \$18.65 | \$29.13 |
| Sep-09 | 256,192 | 170,716 | 434,714 | 1.68 | 3.08 | \$72.39 | \$61.25 | \$18.90 | \$28.36 |
| Oct-09 | 260,217 | 176,589 | 459,147 | 1.75 | 3.13 | \$72.99 | \$61.89 | \$19.59 | \$28.86 |
| Nov-09 | 261,146 | 169,143 | 439,717 | 1.67 | 3.06 | \$72.36 | \$61.59 | \$18.14 | \$28.00 |

***"Allow Amt" is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.*

Prescription Drug Utilization *(continued)*

The following Top 25 Drug Analysis is based on Rx claims incurred Jan-Nov 2009

| Rank | Prev Rank | Product Name | Brand/Generic | Therapeutic Classes | Net Pay Rx | Net Pay Rx as Pct of All Drugs | Scripts Rx | Net Pay Per Day Supply Rx | Patients Rx |
|-------------|------------------|----------------------|----------------------------|----------------------------|-------------------|---------------------------------------|-------------------|----------------------------------|--------------------|
| 1 | 1 | NEXIUM | Single source brand | Gastrointestinal Drugs | \$9,579,982.05 | 100.00% | 49,551 | \$5.24 | 8,207 |
| 2 | 2 | CRESTOR | Single source brand | Cardiovascular Agents | \$6,350,833.15 | 100.00% | 57,249 | \$2.94 | 9,980 |
| 3 | 3 | SINGULAIR | Single source brand | Respiratory Tract Agents | \$6,179,376.36 | 100.00% | 57,224 | \$2.99 | 11,698 |
| 4 | 4 | ENBREL | Single source brand | Immunosuppressants | \$5,323,518.13 | 100.00% | 2,429 | \$62.02 | 436 |
| 5 | 6 | PLAVIX | Multisource brand, generic | Blood Form/Coagul Agents | \$4,654,391.97 | 100.00% | 30,758 | \$4.11 | 4,722 |
| 6 | 5 | HUMIRA | Multisource brand, generic | Immunosuppressants | \$4,620,029.90 | 100.00% | 2,127 | \$61.16 | 382 |
| 7 | 7 | EFFEXOR-XR | Single source brand | Central Nervous System | \$4,554,783.69 | 100.00% | 27,163 | \$4.76 | 4,112 |
| 8 | 8 | CYMBALTA | Single source brand | Central Nervous System | \$4,553,637.70 | 100.00% | 28,951 | \$4.57 | 4,937 |
| 9 | 9 | ACTOS | Single source brand | Hormones & Synthetic Subst | \$4,156,921.89 | 100.00% | 19,523 | \$5.65 | 3,181 |
| 10 | 10 | PANTOPRAZOLE SODIUM | Single source generic | Gastrointestinal Drugs | \$3,566,915.64 | 0.00% | 29,479 | \$3.37 | 5,081 |
| 11 | 11 | LIPITOR | Single source brand | Cardiovascular Agents | \$3,470,253.60 | 100.00% | 30,325 | \$2.97 | 5,170 |
| 12 | 12 | COPAXONE | Single source brand | Misc Therapeutic Agents | \$3,131,511.76 | 100.00% | 1,006 | \$82.01 | 170 |
| 13 | 13 | PREVACID | Single source brand | Gastrointestinal Drugs | \$2,851,042.62 | 100.00% | 15,388 | \$4.94 | 3,422 |
| 14 | 15 | LEXAPRO | Multisource brand, generic | Central Nervous System | \$2,780,708.74 | 100.00% | 33,380 | \$2.39 | 5,877 |
| 15 | 14 | TRICOR | Multisource brand, generic | Cardiovascular Agents | \$2,779,736.77 | 100.00% | 24,763 | \$2.95 | 4,219 |
| 16 | 16 | ABILIFY | Single source brand | Central Nervous System | \$2,616,352.01 | 100.00% | 5,774 | \$13.51 | 1,389 |
| 17 | 17 | LEVAQUIN | Single source brand | Anti-Infective Agents | \$2,327,464.66 | 98.44% | 20,639 | \$13.14 | 15,533 |
| 18 | 18 | BETASERON | Single source brand | Antineoplastic Agents | \$2,247,014.76 | 100.00% | 649 | \$84.06 | 111 |
| 19 | 20 | ADVAIR DISKUS 250/50 | Single source brand | Hormones & Synthetic Subst | \$2,183,000.27 | 100.00% | 10,878 | \$5.67 | 3,371 |
| 20 | 19 | JANUVIA | Single source brand | Hormones & Synthetic Subst | \$2,179,670.90 | 100.00% | 11,681 | \$5.14 | 1,954 |
| 21 | 21 | CELEBREX | Single source brand | Central Nervous System | \$2,141,209.62 | 100.00% | 14,188 | \$4.02 | 2,954 |
| 22 | 22 | TOPAMAX | Multisource brand, generic | Central Nervous System | \$1,897,804.52 | 100.00% | 6,226 | \$8.89 | 2,482 |
| 23 | 24 | DIOVAN HCT | Single source generic | Cardiovascular Agents | \$1,866,612.46 | 100.00% | 21,209 | \$2.30 | 3,236 |
| 24 | 23 | LANTUS | Single source brand | Hormones & Synthetic | \$1,862,051.78 | 100.00% | 10,084 | \$5.40 | 1,985 |
| 25 | 25 | LYRICA | Single source brand | Central Nervous System | \$1,849,014.37 | 100.00% | 12,241 | \$4.69 | 2,328 |

***"Product Name" includes all strengths/formulations of a drug*

Prescription Drug Utilization *(continued)*

In summary, the top 25 drugs represent 12.54% of total scripts and 31.70% of total Rx expenditures..

| Summary | Net Pay Rx | Scripts Rx | Days Supply Rx |
|-------------------------------|---------------|------------|----------------|
| Top Drugs | \$90,551,036 | 594,073 | 21,070,570 |
| All Product Names | \$285,686,310 | 4,736,915 | 138,908,851 |
| Top Drugs as Pct of All Drugs | 31.70% | 12.54% | 15.17% |

Utilization

The top 25 clinical conditions based on incurred claims for Jan-Nov 2009.

| Rank | Prev Rank | Clinical Condition | Net Pay Med | Net Pay IP Acute | Net Pay OP Med | Admits Per 1000 Acute | Days LOS Admit Acute | Visits Per 1000 Office Med | Visits Per 1000 ER | Patients Med | Net Pay Per Pat Med |
|------|-----------|--------------------------------|--------------|------------------|----------------|-----------------------|----------------------|----------------------------|--------------------|--------------|---------------------|
| 1 | 1 | Signs/Symptoms/Oth Cond, NEC | \$54,709,354 | \$8,820,705 | \$45,188,868 | 2.52 | 9.06 | 390.92 | 13.99 | 79,108 | \$691.58 |
| 2 | 2 | Prevent/Admin Hlth Encounters | \$43,603,428 | \$248,824 | \$43,184,246 | 0.03 | 9.63 | 778.64 | 0.61 | 146,545 | \$297.54 |
| 3 | 3 | Coronary Artery Disease | \$39,665,373 | \$24,222,759 | \$15,420,479 | 4.4 | 3.54 | 63.85 | 2.45 | 8,673 | \$4,573.43 |
| 4 | 4 | Osteoarthritis | \$37,683,197 | \$24,230,976 | \$13,381,777 | 4.25 | 3.02 | 214.77 | 0.67 | 21,621 | \$1,742.90 |
| 5 | 5 | Gastroint Disord, NEC | \$34,877,230 | \$6,282,107 | \$28,582,730 | 2.15 | 4.21 | 159.6 | 17.95 | 35,644 | \$978.49 |
| 6 | 6 | Respiratory Disord, NEC | \$32,186,754 | \$8,496,609 | \$23,640,405 | 1.33 | 3.49 | 115.56 | 12.42 | 30,262 | \$1,063.60 |
| 7 | 7 | Spinal/Back Disord, Low Back | \$26,825,104 | \$7,515,314 | \$19,259,604 | 1.13 | 3.26 | 609.98 | 6.26 | 31,159 | \$860.91 |
| 8 | 8 | Arthropathies/Joint Disord NEC | \$25,547,417 | \$1,618,728 | \$23,827,917 | 0.47 | 3.19 | 449.56 | 6.69 | 51,949 | \$491.78 |
| 9 | 9 | Pregnancy w Vaginal Delivery | \$18,463,037 | \$18,356,819 | \$106,218 | 6.4 | 2.47 | 0.51 | 0.02 | 2,647 | \$6,975.08 |
| 10 | 10 | Spinal/Back Disord, Ex Low | \$17,351,067 | \$3,733,288 | \$13,593,142 | 0.44 | 3.55 | 602.4 | 3.05 | 24,088 | \$720.32 |
| 11 | 11 | Chemotherapy Encounters | \$16,907,107 | \$3,177,574 | \$13,728,832 | 0.65 | 3.54 | 1.37 | 0 | 466 | \$36,281.35 |
| 12 | 12 | Cardiovasc Disord, NEC | \$16,326,674 | \$3,221,708 | \$13,102,708 | 1.37 | 2.99 | 64 | 7.72 | 15,987 | \$1,021.25 |
| 13 | 13 | Condition Rel to Tx - Med/Surg | \$15,667,531 | \$11,478,877 | \$4,175,596 | 2.48 | 5.57 | 8.16 | 2 | 3,296 | \$4,753.50 |
| 14 | 14 | Renal Function Failure | \$15,285,063 | \$2,289,813 | \$12,761,714 | 0.44 | 5.7 | 17.03 | 0.37 | 2,240 | \$6,823.69 |
| 15 | 15 | Cancer - Breast | \$15,248,314 | \$901,538 | \$14,288,783 | 0.38 | 3.42 | 47.19 | 0.02 | 2,566 | \$5,942.45 |
| 16 | 16 | Infections - ENT Ex Otitis Med | \$14,795,684 | \$334,473 | \$14,455,419 | 0.35 | 2.21 | 632.11 | 9.91 | 92,926 | \$159.22 |
| 17 | 17 | Cholecystitis/Cholelithiasis | \$14,056,176 | \$3,555,216 | \$10,500,342 | 1.27 | 3.51 | 7.45 | 1.56 | 2,668 | \$5,268.43 |
| 18 | 18 | Newborns, w/wo Complication | \$12,843,280 | \$12,229,777 | \$609,045 | 10.01 | 3.38 | 4.99 | 0.13 | 3,048 | \$4,213.67 |
| 19 | 19 | Infec/Inflam - Skin/Subcu Tiss | \$12,457,930 | \$2,849,448 | \$9,566,409 | 1.49 | 4.31 | 281.56 | 6.02 | 45,535 | \$273.59 |
| 20 | 20 | Gynecological Disord, NEC | \$11,519,900 | \$1,060,811 | \$10,456,328 | 0.46 | 2.25 | 95.65 | 1.51 | 23,234 | \$495.82 |
| 21 | 21 | ENT Disorders, NEC | \$10,953,554 | \$330,885 | \$10,617,213 | 0.15 | 2.86 | 703.03 | 2.68 | 39,150 | \$279.78 |
| 22 | 22 | Diabetes | \$10,788,589 | \$2,011,463 | \$8,730,408 | 0.82 | 4.76 | 213.16 | 1.45 | 22,538 | \$478.68 |
| 23 | 23 | Hypertension, Essential | \$10,592,270 | \$1,682,500 | \$8,851,257 | 0.63 | 3.31 | 320.75 | 1.87 | 48,347 | \$219.09 |
| 24 | 25 | Hernia/Reflux Esophagitis | \$10,548,925 | \$2,327,275 | \$8,216,236 | 0.81 | 3.55 | 54.51 | 1.12 | 12,484 | \$845.00 |
| 25 | 24 | Cardiac Arrhythmias | \$10,350,958 | \$3,962,218 | \$6,384,201 | 1.24 | 2.76 | 44.62 | 2.01 | 6,034 | \$1,715.44 |

NOTE: Medical payments represent only the payments made for the specified condition.

Utilization *(continued)*

In Summary, the top clinical conditions represent more than 57.58% of total paid claims for all clinical conditions.

| Summary | Net Pay Med | Net Pay IP Acute | Net Pay OP Med | Admits Per 1000 Acute | Days LOS Admit Acute | Visits Per 1000 Office Med | Visits Per 1000 ER |
|---|---------------|---------------------|-------------------|--------------------------|-------------------------|-------------------------------|-----------------------|
| Top Clinical Conditions | \$529,253,915 | \$154,939,704 | \$372,629,875 | 45.69 | 3.75 | 5,881.34 | 102.48 |
| All Clinical Conditions | \$919,089,446 | \$267,751,226 | \$648,063,302 | 86.98 | 3.96 | 8,927.37 | 228.09 |
| Top Clinical Conditions as Pct of All Clinical Conditions | 57.58% | 57.87% | 57.50% | 52.53% | 94.63% | 65.88% | 44.93% |

Claims Lag Analysis

The following claims lag information is based on medical claims (does not include Rx) incurred Jan-Nov 2009.

| Plan | Number of Medical Claims | Avg Days Lag Per Claim | % Claims Paid Within 30 Days | % Claims Paid Within 60 Days | % Claims Paid Within 90 Days |
|------------------------|---------------------------------|-------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| Commonwealth Enhanced | 491 | 41.8 | 51.12% | 72.51% | 91.24% |
| Commonwealth Essential | 4 | 5 | 100.00% | 100.00% | 100.00% |
| Commonwealth Premier | 854 | 46.1 | 66.74% | 82.08% | 87.00% |
| Commonwealth Select | 50 | 90.8 | 10.00% | 38.00% | 72.00% |
| Capitol Choice | 990,834 | 18.3 | 86.55% | 94.61% | 97.04% |
| Maximum Choice | 426,946 | 19.1 | 85.88% | 93.92% | 96.60% |
| Optimum PPO | 6,388,260 | 19.1 | 85.56% | 94.14% | 96.86% |
| Standard PPO | 123,421 | 25.1 | 78.32% | 90.68% | 94.68% |
| ~Missing | 20,724 | 39 | 57.97% | 80.91% | 91.03% |
| All Plans | 7,951,584 | 19.2 | 85.51% | 94.10% | 96.82% |

**Missing means the claims could not be tagged to a specific plan.*

Claims Lag Analysis *(continued)*

The following claims lag information is based on all claims (**Medical and Rx**) incurred and paid during the most recent rolling year.

| | Month Paid | | | | | |
|---------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| Service Month | Mar-09 | Apr-09 | May-09 | Jun-09 | Jul-09 | Aug-09 |
| Dec-08 | \$2,221,485.30 | \$1,774,533.05 | \$467,075.90 | \$434,738.87 | \$1,882.60 | \$225,326.89 |
| Jan-09 | \$6,825,284.71 | \$2,618,893.64 | \$1,095,903.87 | \$967,965.92 | \$138,534.54 | \$528,901.94 |
| Feb-09 | \$37,683,975.33 | \$5,857,474.36 | \$2,335,048.69 | \$755,743.70 | \$604,791.40 | \$323,680.45 |
| Mar-09 | \$62,805,356.22 | \$37,708,122.31 | \$5,957,587.88 | \$3,192,095.40 | \$1,122,431.15 | \$284,629.57 |
| Apr-09 | N/A | \$58,384,095.65 | \$39,848,044.22 | \$6,007,258.59 | \$2,199,903.14 | \$1,094,590.42 |
| May-09 | N/A | N/A | \$54,598,166.53 | \$37,880,627.10 | \$6,511,603.91 | \$1,730,126.38 |
| Jun-09 | N/A | N/A | N/A | \$62,173,844.14 | \$44,917,386.01 | \$5,849,358.88 |
| Jul-09 | N/A | N/A | N/A | N/A | \$63,517,173.38 | \$43,608,187.05 |
| Aug-09 | N/A | N/A | N/A | N/A | N/A | \$57,200,443.35 |
| Sep-09 | N/A | N/A | N/A | N/A | N/A | N/A |
| Oct-09 | N/A | N/A | N/A | N/A | N/A | N/A |
| Nov-09 | N/A | N/A | N/A | N/A | N/A | N/A |

| | Month Paid | | | | | |
|---------------|-----------------|-----------------|-----------------|-----------------|----------------|----------------|
| Service Month | Sep-09 | Oct-09 | Nov-09 | Dec-09 | Jan-10 | Feb-10 |
| Dec-08 | (\$207,336.41) | (\$8,605.36) | \$1,445.77 | \$35,392.63 | \$23,901.06 | \$8,416.23 |
| Jan-09 | \$675,179.51 | \$58,664.77 | (\$4,702.73) | (\$72,954.01) | \$30,583.90 | \$28,130.11 |
| Feb-09 | \$241,274.42 | \$122,696.72 | \$52,293.16 | (\$17,793.93) | \$24,765.36 | \$192.55 |
| Mar-09 | \$696,836.94 | (\$21,163.67) | (\$25,716.70) | (\$81,858.39) | \$157,772.66 | \$81,325.26 |
| Apr-09 | \$404,936.31 | \$304,661.20 | \$122,664.85 | \$2,410.60 | \$166,187.33 | \$33,694.13 |
| May-09 | \$581,618.24 | \$777,850.11 | \$681,358.61 | (\$34,275.77) | \$62,366.14 | (\$35,463.15) |
| Jun-09 | \$2,232,543.36 | \$798,812.78 | \$393,612.66 | \$85,319.43 | \$269,447.26 | \$96,561.36 |
| Jul-09 | \$6,377,666.01 | \$2,112,555.62 | \$1,292,733.38 | \$764,922.06 | \$337,610.74 | \$114,493.49 |
| Aug-09 | \$42,071,875.18 | \$5,262,986.33 | \$1,912,194.21 | \$831,219.84 | \$773,132.05 | \$338,527.28 |
| Sep-09 | \$61,641,086.33 | \$39,647,697.15 | \$6,149,945.38 | \$2,190,567.39 | \$923,527.71 | \$393,198.37 |
| Oct-09 | N/A | \$66,554,932.82 | \$39,684,216.34 | \$8,197,013.46 | \$2,969,430.71 | \$926,976.92 |
| Nov-09 | N/A | N/A | \$56,720,016.91 | \$44,922,773.41 | \$6,306,995.99 | \$2,608,502.10 |

Claims Distribution Based on Age/Gender

The following is based on claims incurred Jan-Nov 2009.

| | Female | | | Male | | |
|------------|-------------|--------------------|--------------------|-------------|--------------------|--------------------|
| Age Group | Members Avg | Net Pay Med and Rx | Net Pay Per Member | Members Avg | Net Pay Med and Rx | Net Pay Per Member |
| Ages < 1 | 1,239 | \$9,975,197.25 | \$8,052.96 | 1,272 | \$13,621,989.44 | \$10,709.11 |
| Ages 1-4 | 5,282 | \$7,562,649.61 | \$1,431.78 | 5,440 | \$9,227,490.54 | \$1,696.14 |
| Ages 5-9 | 7,083 | \$7,967,009.57 | \$1,124.84 | 7,385 | \$10,164,879.61 | \$1,376.44 |
| Ages 10-14 | 7,893 | \$11,433,256.71 | \$1,448.57 | 8,277 | \$14,729,570.44 | \$1,779.54 |
| Ages 15-17 | 5,032 | \$10,273,592.96 | \$2,041.49 | 5,377 | \$10,195,094.17 | \$1,896.23 |
| Ages 18-19 | 3,483 | \$7,927,486.75 | \$2,275.79 | 3,553 | \$5,215,311.47 | \$1,467.94 |
| Ages 20-24 | 7,417 | \$18,527,923.05 | \$2,498.20 | 6,461 | \$9,997,517.63 | \$1,547.27 |
| Ages 25-29 | 8,678 | \$30,745,386.38 | \$3,543.07 | 4,237 | \$7,499,620.92 | \$1,770.20 |
| Ages 30-34 | 9,537 | \$39,672,330.45 | \$4,159.96 | 5,155 | \$11,955,533.44 | \$2,319.44 |
| Ages 35-39 | 11,468 | \$47,066,332.76 | \$4,104.29 | 6,118 | \$17,546,958.29 | \$2,868.27 |
| Ages 40-44 | 12,376 | \$56,931,226.02 | \$4,600.02 | 6,655 | \$24,225,140.03 | \$3,640.25 |
| Ages 45-49 | 14,969 | \$80,064,384.07 | \$5,348.86 | 8,259 | \$37,854,961.08 | \$4,583.65 |
| Ages 50-54 | 18,054 | \$115,859,389.98 | \$6,417.42 | 10,456 | \$62,435,164.19 | \$5,971.06 |
| Ages 55-59 | 20,576 | \$142,592,700.70 | \$6,929.98 | 13,026 | \$94,001,429.87 | \$7,216.34 |
| Ages 60-64 | 18,326 | \$149,420,113.80 | \$8,153.49 | 12,314 | \$107,132,246.15 | \$8,699.75 |
| Ages 65-74 | 1,854 | \$16,063,666.97 | \$8,664.33 | 1,332 | \$14,035,298.18 | \$10,537.80 |
| Ages 75-84 | 118 | \$1,168,196.78 | \$9,908.37 | 103 | \$1,496,366.44 | \$14,499.67 |
| Ages 85+ | 8 | \$187,787.52 | \$24,387.99 | 1 | \$0.00 | \$0.00 |

Allowed Amount Distribution

The following table shows the distribution of members for whom the amounts of charges within the specified ranges were allowed. The data appears for the years of 2005—2008 and year to date for 2009.

| Allowed Amount | 2005 | 2006 | 2007 | 2008 | 2009 |
|-----------------------------|----------------|----------------|----------------|----------------|----------------|
| less than 0.00 | 90 | 9 | 16 | 24 | 6 |
| \$0.00 - \$499.99 | 50,002 | 54,058 | 53,891 | 53,572 | 56,136 |
| \$500.00 - \$999.99 | 29,232 | 32,931 | 33,830 | 34,201 | 35,900 |
| \$1,000.00 - \$1,999.99 | 35,407 | 40,360 | 42,464 | 42,340 | 43,655 |
| \$2,000.00 - \$4,999.99 | 47,471 | 54,430 | 56,819 | 58,570 | 58,323 |
| \$5,000.00 - \$9,999.99 | 26,210 | 30,373 | 32,271 | 34,496 | 33,125 |
| \$10,000.00 - \$14,999.99 | 9,138 | 10,608 | 11,983 | 13,251 | 12,828 |
| \$15,000.00 - \$19,999.99 | 4,055 | 4,726 | 5,470 | 6,337 | 6,070 |
| \$20,000.00 - \$29,999.99 | 3,539 | 4,284 | 5,050 | 5,930 | 5,662 |
| \$30,000.00 - \$49,999.99 | 2,312 | 2,844 | 3,268 | 3,828 | 3,852 |
| \$50,000.00 - \$74,999.99 | 932 | 1,090 | 1,306 | 1,494 | 1,534 |
| \$75,000.00 - \$99,999.99 | 390 | 465 | 536 | 592 | 588 |
| \$100,000.00 - \$149,999.99 | 299 | 354 | 406 | 500 | 473 |
| \$150,000.00 - \$199,999.99 | 116 | 117 | 160 | 193 | 188 |
| \$200,000.00 - \$249,999.99 | 57 | 60 | 81 | 82 | 98 |
| over \$249,999.99 | 74 | 99 | 127 | 154 | 136 |
| Total | 209,324 | 236,808 | 247,678 | 255,564 | 258,574 |

Summary of Enrollment and Claims

The following provides a summary of members, incurred medical claims, and incurred Rx claims for the most recent rolling year.

| Time Period | Members | Net Pay Med and Rx | Net Pay Med | Net Pay Rx | Claims Paid | Claims Paid Med | Scripts Rx |
|--------------------|----------------|---------------------------|--------------------|-------------------|--------------------|------------------------|-------------------|
| Dec 2008 | 253,976 | \$115,833,796.00 | \$87,064,971.66 | \$28,768,824.34 | 786,048 | 314,659 | 462,449 |
| Jan 2009 | 254,764 | \$99,928,057.75 | \$75,903,851.16 | \$24,024,206.59 | 715,710 | 289,200 | 416,297 |
| Feb 2009 | 255,233 | \$98,478,367.35 | \$74,828,132.06 | \$23,650,235.29 | 721,573 | 305,277 | 407,481 |
| Mar 2009 | 255,966 | \$111,877,418.63 | \$84,937,078.01 | \$26,940,340.62 | 820,955 | 347,153 | 463,467 |
| Apr 2009 | 256,288 | \$108,568,446.44 | \$83,205,920.74 | \$25,362,525.70 | 765,335 | 328,577 | 427,313 |
| May 2009 | 256,558 | \$102,753,978.10 | \$77,492,036.18 | \$25,261,941.92 | 730,860 | 297,778 | 423,272 |
| Jun 2009 | 256,758 | \$116,816,885.88 | \$90,837,464.23 | \$25,979,421.65 | 762,333 | 329,879 | 422,087 |
| Aug 2009 | 256,661 | \$108,390,378.24 | \$82,189,148.76 | \$26,201,229.48 | 749,724 | 316,323 | 422,939 |
| Jul 2009 | 256,600 | \$118,125,341.73 | \$91,985,075.21 | \$26,140,266.52 | 772,546 | 341,500 | 420,481 |
| Sep 2009 | 256,192 | \$110,946,022.33 | \$84,319,226.67 | \$26,626,795.66 | 782,690 | 337,280 | 434,714 |
| Oct 2009 | 260,217 | \$118,332,570.25 | \$89,916,079.31 | \$28,416,490.94 | 824,075 | 353,762 | 459,147 |
| Nov 2009 | 261,146 | \$110,558,288.41 | \$83,475,433.19 | \$27,082,855.22 | 765,819 | 315,146 | 439,717 |

NOTE: Includes run out data from all Carriers

The following illustrates the change in incurred claims (includes medical and Rx) by rolling year.

| Time Period | Members | Total Medical and Rx Claims | Total Medical Claims | Total Rx Claims |
|---------------------|----------------|------------------------------------|-----------------------------|------------------------|
| Dec 2007 - Nov 2008 | 251,727 | 1,227,769,453 | \$935,185,176 | \$292,584,277 |
| Dec 2008 - Nov 2009 | 258,542 | 1,328,026,775 | \$1,013,467,750 | \$314,559,024 |
| % Change (Roll Yrs) | 2.70% | 8.20% | 8.40% | 7.50% |